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# PITFALLS

BY

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to 1910. Assistant Professor of Medicine at Marquette  
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YASSEL IMAI

101

TO MY DEAR WIFE  
WHO HAS FOR MANY YEARS STOOD  
BETWEEN ME AND THE TELEPHONE  
THIS BOOK IS DEDICATED



**"Oh, Thou who didst with Pitfall and with Gin  
Beset the Road I was to wander in,  
Thou wilt not with Predestination round  
Enmesh me, and impute my Fall to Sin?"**

**Quatrain LVII, First Ed.  
Rubaiyat.**



## PREFACE

IN the writing of this book, the author has had always one object in mind and that was to bring before the minds of medical men, as well as the public at large, the many pitfalls into which they are ever in danger of being precipitated.

If the warnings contained in the following chapters should have the effect of opening our eyes to certain dangers, thereby preventing any future mistakes, I will feel that its object will be fulfilled, as we all know "It is human to err, and to forgive divine."

The chapters are taken from notes of twenty years' experience and—barring some frills—are true to life, showing the many peculiar incidents—tragic and otherwise—that crop up in the life of a doctor.

As to the author's connection with what is written here, all that may be said, my dear reader, is that they are only "Twice-Told Tales."

A. J. C.





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## **PITFALLS**



# PITFALLS

## CHAPTER I

### KOPLIK'S SPOTS

ONE night Doctor X. said to me: "I have been waiting for four days for a call from the parents of a child, a little girl five years old, whom the father asked me to attend five days ago, but after my first visit, I was promptly discharged and another physician was employed."

Now, whenever Doctor X. makes some eccentric or puzzling remark I always know from past experience that he has something on his mind usually worth getting off.

I have for many years been what he calls a "boon companion" and, I dare say, that I have heard many things from him that to my mind were technically exquisite.

On the evening that he made this remark, I said: "Well, did you get the call?" He smiled and said: "Yes, to-day."

But that is all I could get out of him until a long

time after when I asked him how he came out with that case where they called him back after dismissal.

He said, when he was called the first time he found the child up and running around, but her mother said she complained of a headache and just felt a little "dumpish" and "out of sorts."

He thought the mother was unnecessarily alarmed, because the girl being the only child she pampered her somewhat, but on closely examining her throat and mouth, he saw something that gave him a clue as to what was brewing and caused her dumpishness.

So he advised the mother to put the child to bed and keep her there and not allow other children to come to see her because she was coming down with measles, and while measles in themselves were not so bad, the child, if it is let run around, might get a chill and pneumonia set in which might prove serious.

The father came home at noon and when his wife told him that Viola—as they called her—had measles, he looked at the little girl and naturally said: "Where are they: I don't see any measles?"

So when his wife told him Doctor X. said they would come out in a few days, he doubted it very much and called in another doctor who always made it a practice to be optimistic and set the parents' minds at ease whenever they became alarmed.

Anyway this doctor told the parents that he could not understand why Doctor X. said Viola had



measles, so he told them to let the little girl run out with the other children of the neighborhood, which they did, "because it was a shame to keep her in bed," and poor little Viola was happy to get the chance to run around again with her little playmates. The parents were happy to think they were not going to be quarantined. So they promptly discharged Doctor X.

He told me that the funny part of it was that both the mother and father as well as Doctor Y., had a good laugh at Doctor X.'s "ridiculous diagnosis," for a few days at least.

When I asked Doctor X. how he knew he was going to be called again as he said he was "waiting for four days for a call," he told me that on examining the child's mouth, he saw little white spots with red areola around them on the inside of the mouth scattered around on the buccal membrane; these little spots are known as "Koplik's spots" and they are a sure sign of approaching measles.

He told me that when he was discharged he suspected they called some one else who differed from him in his diagnosis—but he felt that when they found the other doctor was mistaken, they probably would discharge his colleague and call him back which was just what they did.

However, Doctor X. said, the worst part of the story, or the tragic part of it was, Viola started



an epidemic of measles among all her playmates in the thickly populated neighborhood and the poor little girl developed a virulent pneumonia with the measles and for three weeks lingered between life and death and the poor parents were worn out with worry and loss of sleep watching anxiously at her bedside all this time, but fortunately she recovered.

However, unfortunately two of her little playmates lost their lives from pneumonia accompanying the measles contracted from Viola when she was allowed to run around and play with them until she broke out into a rash.

Had the doctor understood why Doctor X. said Viola was coming down with the measles, this tragedy to Viola's two little playmates might have been avoided.

Doctor X. said he often wondered why people make so light of measles; he said it is an extremely dangerous disease, owing to the fact that there is always a bronchial irritation that goes with it, that very often develops into a septic bronchial pneumonia which is deadly in its effect on many children every year.

"Measles is a preventable disease and it is not necessary, as some mothers are foolish enough to think, for children to have this, or any other of the childhood diseases for that matter."

Children that grow up without going through diseases in their childhood are apt to be healthier men

and women than those who have the diseases, and one thing is certain, that they who escape the childhood diseases naturally escape the defects that very often follow them.

## CHAPTER II

"BELLADONNA"—"A FOOL AND HIS DOCTOR"

ONE evening I was sitting in Doctor X.'s office waiting for him to return from a call.

When he came in I knew he had gone through some exciting ordeal, for his collar was wilted and his hair tousled and his face all perspiration, so I said: "What in the world is the matter, doctor?" He looked at me with that smile and passed into his wash room to clean up. When he came out we went into his study, which he uses for a smoke room, too, and he lit his pipe and puffed away for awhile and said: "Wasn't it Shakespeare who said, that 'a fool will always be his own doctor'?" I thought to myself, gee I don't know, but I admitted it was. Then he said he could improve the aphorism by adding, "A damn fool will make his neighbor his doctor."

He said he was called in consultation that evening with Doctor V. who was in attendance on a patient who was suffering from lumbago. The patient was a very large stout lady who weighed probably 250 lbs. She was getting along finely under Doctor V.'s care and was around attending to some of her

household duties. She was the mother of five children, the oldest of which was 22 years and the youngest 11 years of age. Her husband was living and well; his occupation as traveling salesman kept him away from home a great deal. The patient was about fifty years of age. Doctor X. said when he arrived at the house everything was in an uproar, the children crying and hysterical over the condition of their mother. Doctor V. was there doing all he could. The first thing Doctor X. noticed on seeing the patient was that the pupils of her eyes were widely dilated as if she had atropin drops inserted, but the family and Doctor V. said no. Doctor X. thought then that she might have been taking it internally, but Doctor V. said no, he had her under treatment with the salicylates. Doctor X. found the patient's heart rapid, her skin was dry, but she presented a wild appearance with the dilated pupils and he knew he had to think fast as the patient seemed about as far gone as was possible and still be alive; so while he was going over her he saw "something" which gave him a clue as to what was the cause of her collapse. He had no time to wait to get much of her history, but when he discovered the edge of a plaster sticking up above the patient's gown at the shoulder, he quickly stripped the gown down from her body and there found pasted on her large broad back six large-sized belladonna plasters from which she was absorbing the belladonna through



her skin and being gradually poisoned from having them on for four or five days without Doctor V. or the family knowing anything about it.

Doctor X. said he stripped them off quickly and had to scrape the sticky paste off her back and have her daughter get soap and hot water to wash the back. In the meantime he injected pilocarpin and stimulants into her arm and after some hustling and hard work he finally with the assistance of Doctor V. revived her and then gave her a bawling out for using so many poisonous plasters on her back.

The history he subsequently obtained from her was that a neighbor had told her what was good for her lumbago. That she should go into a drug store and get as many belladonna plasters as her back would hold—and Doctor X. said, believe me, that back had room for many, and by this method she thought she could get rid of her pains.

The family were happy to find that Doctor X. discovered the trouble just in time to save the life of their mother and the Doctor said that he was sure she would have died within an hour as her condition was such that they both—Doctor V. and himself—had no hope until he accidentally discovered what was wrong. Then Doctor X. told me of another ridiculous case where a lady came into his office one day with an abscess of the cervical gland and it looked to him as if it was just ready to break and evacuate the pus. The Doctor said when he

saw it could be opened without her feeling it, he reached for his lance but she was watchful and suspicious, so when she saw him take the lance she "beat it." Doctor X. said: "Well, that would have been all right, it would open of its own accord anyway," but the lady went home and on reaching her place of residence she met an old colored woman who lived in the rear of her residence and whose husband was chef at one of the hotels. This husband, it seems, always kept frogs in his cellar, I believe, for the serving of frog legs to the patrons of the hotel. When the old colored lady saw what was wrong with her neighbor and heard her complain about how Doctor X. was going to cut her with a "big" knife she said: "Neah yo' mine, honey, I'se got sumpin' 'at'l fix dat all right; doan you' have any fummi-diddles wit' dem fool doctahs." So she goes into her own cellar and brings in an old bandanna handkerchief a large yellow bellied live frog. The afflicted woman didn't know just what the wench was going to do so she allowed her to tie the frog in the bandanna handkerchief to the abscess with its slimy yellow belly against the skin. Then the frog began to squirm and wriggle, and the lady began to scream—yelling "What is it? It's alive! Oh, mercy! Take it away!" But the wench persisted and held the knot tight over her head until the frog in its struggles scratched the abscess open and the pus run down into the bandanna and the lady's face,

neck and clothing became smeared with pus. Doctor X. said the abscess being opened of course got all right after a few days, and would have gotten better without this grewsome treatment if it were let alone. Also the woman took a terrible chance; the frog might have set up a septic condition where she would have lost her life, but the worst part of the story, Doctor X. said, was these two ignoramuses; the lady and the negro wench think that the only cure for an abscess is to apply a big yellow bellied live frog to it, and the poor unfortunate children anywhere in the neighborhood who happen to get an abscess of any kind are frightened to death by the treatment recommended and administered by those two fools.



## CHAPTER III

### THE MAN WITH THE LAUGHING MASK <sup>1</sup>

ONE evening Doctor X. was sitting in his study after office hours and his rounds of the day, and a young man about eighteen years of age called and was led into the doctor's study. Doctor X. had the habit of "taking in" everything unusual that showed externally on any one, before the patient was seated in his presence. He noticed this young man limped when he walked and that he had a peculiar expression on his face that made him think of "The man with the laughing mask." Doctor X. thought to himself, "Why does this man make me think of 'The man with the laughing mask'?" Then, naturally, his thoughts ran back to his medical knowledge of

<sup>1</sup> This case was reported in a more technical manner in the *Journal of the American Medical Association*, Nov. 5, 1910, and Doctor X. received a kindly personal letter from the late lamented Sir William Osler of Oxford, England, who saw the article in the *Journal*, congratulating him on the manner in which he stood by the young man and persisted in his treatment.

It was published also as a "prize story" under the caption "The Most Difficult Thing I Ever Did," in the *American Magazine*, November, 1915.



a grin-like expression that a patient acquires following an infection that results in a grave and frightful disease. This all ran through the doctor's mind before the young man said a word. Doctor X. asked the man why he limped and obtained a history as follows: He said, while out in the country, near one of the lakes, where he was taking a week-end, a number of men were having what they call a Marathon race across country, barefooted. He joined in the race, and when crossing the runway of an old barn, he stubbed his big toe, and it swelled up. He said he consulted Doctor Y. who was one of the party at the lake, and Doctor Y. said he had sprained the toe, and recommended hot compresses, of a solution of boric acid, which would be a rational treatment for a sprained toe, but he kept on getting worse and he decided to consult Doctor X. Doctor X. paid particular attention to the manner in which he stubbed his toe, "at the runway of an old barn." This brought to his mind that he had read somewhere in medical literature that certain virulent germs are found plentifully in manure and dirt around old barns, so he wondered if it was possible that the young man had a splinter buried in his toe, so he examined it carefully and sure enough noticed a spot near the top of the toe, where a splinter entered five days before, and which had closed quickly after the injury, so the doctor opened it under local anæsthesia and with a small mouse-

tooth forceps removed the splinter of wood about three-quarters of an inch long. While he was removing the splinter, he noticed the young man was continually throwing his head backward and snapping and grinding his teeth, so this led the doctor to believe what he formerly suspected, when he noticed the grin-like expression, that lockjaw or tetanus, as it is termed by physicians, was setting in, so without saying anything that would scare the young man he immediately injected three thousand units of tetanus antitoxin and after dressing the wound, took the young man home and put him to bed. The next morning he called early, and the mother said the boy was complaining of an earache. Doctor X. knew it was not an earache, but a pain in muscles over the angle of the jaw, near the ears, that patients call an earache, so Doctor X., knowing how the parents loved their only boy, dreaded the ordeal of telling them that he had lockjaw. Still he knew it was his duty, so he called the father and mother aside and told them and made them promise that they would leave the boy in his care entirely and not disturb him in any way while he was trying to save his life and after the first shock of knowing the worst was over, they never saw the boy again for a whole week. Doctor X. had another physician take charge of his other patients and during the seven days and seven nights that Doctor X. remained by the bedside of this young man, he never slept one minute. He

found that tobacco kept him awake, so he chewed tobacco continually and drank black coffee that was handed into the room, with food for himself and his patient. He had the druggist get all the antitoxin that was in the city at the time and when this was getting low he had more shipped from another city, so he kept on injecting three thousand units of tetanus antitoxin into his patient's body every three or four hours, night and day. Doctor X. knew that if he got a nurse and left the patient in her care, it would only add more excitement and that would bring on more convulsions. As it was, the young man was having violent convulsions, coming on every few minutes, when his jaw would snap suddenly, and if the tongue happened to protrude during the relaxation between the convulsions, he would bite pieces off the edge and tip of the tongue and blood would run from his mouth. Doctor X. made a sort of gauze gag that held the tongue back and this fixture saved a great deal of suffering. As I said before, Doctor X. gave his other patients over to the care of another physician and stuck by the bedside of this young boy continually, nursing as well as doctoring him. After he had injected about fifty thousand units of the antitoxin he noticed that following each injection the convulsions were not so violent as the first three days. During the first three days when the paroxysms occurred, the patient would arch like a bow. The convulsions would come with



a sudden snap and the doctor feared the patient would tear his abdominal muscles. He would rest on the back of his head and heels, his body would arch into a bow-like "oposthotonos position," as the physicians called it, and would remain in a tense manner for about three or four minutes and then he would gradually relax his body and sink down on the bed and rest again until another convulsion would come, which reappeared usually about every five to eight minutes during the first three days, but, as I said before, after Doctor X. had injected fifty thousand units his rest between convulsions seemed to last longer, fifteen to twenty minutes. This encouraged the doctor to persist in injecting the drug, so he continued his labors to save the boy, and his anxiety and excitement in such a grave case with the tobacco and coffee kept him awake night after night and day after day at his task of life-saving, but after he had injected about eighty thousand units, following each injection, his patient would drop off into a sound sleep for two or three hours. Then he would wake with a sudden convulsion coming on but not so severe as at first. On the morning of the sixth day the patient was somewhat delirious; at times, singing and whistling and thinking he was with his companions, and talking foolish in general, but Doctor X. found that his heart was strong and did not worry about the delirium, but persisted in the injections. Doctor X. noticed the boy's body

was literally covered with a strawberry-like rash but knew such a thing occurs as a rule on injecting any serum in large quantities, so he knew it was from the antitoxin. The boy began to swallow more nourishment on the sixth day and had longer rest between the convulsions. Doctor X. continued the injections until the morning of the eighth day, when the boy was conscious, having no more convulsions or delirium, but only just weak after his horrible ordeal, and on that beautiful morning the doctor gave the boy back to two anxious parents, alive and on the road to health again. The gratitude expressed in their faces on seeing their boy alive, after that trying week, was something Doctor X. will never put from his memory. During the week he injected into his patient's body one hundred and twelve thousand five hundred units of tetanus antitoxin, which was the most ever used in the treatment of lockjaw in any human being up to that time. Doctor X. always felt that enough antitoxin had never been used before because of the expense of the drug, so he felt that a human life was worth more than money expended for the drug and did not consider the expense, thereby saving the life of his patient. The grin-like expression that made Doctor X. think of "The man with the laughing mask" is what physicians call the "risus sardonicus" which is a grinning expression produced by spasms of the facial muscles and later on in the disease come on spasms of the

chest muscles and all the muscles. The young man who went through this ordeal is now a very capable physician practicing in the same city as Doctor X. and many times helps the doctor out when his tasks become too hard and Doctor X. has a feeling toward him akin to that of his own son.

## CHAPTER IV

### A BRONZED MAN

ONE summer Doctor X. and his family were at a cottage out at one of the lakes and friends of a dentist who was ill for a long time heard of the doctor being at the lake which was near the village in which the dentist lived. They called and asked the doctor to come to the village and consult with Doctor Z. who was in attendance on the case. Doctor X., being reluctant to interfere without being called by Doctor Z., told them he would come if the doctor requested him, so the relatives told Doctor Z. to call him, which he did. Doctor X., on entering the sick room with Doctor Z., immediately saw "something" that gave him a clue to a diagnosis made later.

Doctor Z. told Doctor X. that his patient was ill for a year or more with a very grave stomach trouble and his condition was so bad that he had decided to take him to the city for an operation, which was necessary to save the patient's life. He also said his patient consented to go and have the operation, but relatives first thought it best to have a consultation. Doctor Z. privately told Doctor X. that his



patient was suffering from cancer of the stomach and an operation was his only chance. Now I said Doctor X. saw "something" on entering the sick room. The "something" he saw was that the patient looked like a "bronzed man" lying in bed. So, having his implements for examination along, he proceeded to get the facts and found first that all over the man's body the skin looked somewhat bronzed; then, his patient having an irritable stomach, that was his second clue to a later diagnosis. Doctor X. proceeded with a thorough examination and found that the man had an extremely low blood-pressure, being only 80 mm. systolic, where in a normal person it should be 130 mm. systolic. This gave him the third clue. And then, after finding by laboratory tests that his blood only showed slight reduction of hemoglobin and red cells and Wassermann negative. He made his patient get up on his feet and by tests found him to be extremely asthenic and dizzy and fatigued on the slightest exertion. This clinched the four cardinal symptoms that he was looking for; the bronzed skin, the irritable stomach, low blood-pressure and extreme fatigue on exertion are the four cardinal symptoms of "Addison's Disease." So Doctor X. called Doctor Z. into another room and told him not to take his patient to the city for operation or he would die on the operating table, so that's how Doctor X. added about ten years more to the dentist's life. Of course



the disease is incurable, but there can be remissions with proper tonics, and in this case the patient got out of bed again and partly attends to his duties, but he is a very sick, incurable man, and will die in from eight to ten years. As far as medical men know about Addison's disease, it is said to be a tuberculosis of the adrenals, which means the suprarenal capsules or capsules of the kidneys, and no cure is known for it, but if recognized early, life can be prolonged. The disease is quite rare and is very often mistaken for cancer of the stomach, owing to the fact that people who have cancer have a discolored skin, but the discoloration is more ashy and not so bronzed or dark as in Addison's Disease. The disease is named after Thomas Addison, a physician who lived in London and first described the symptoms, away back in 1855.

## CHAPTER V

### LOOK BEFORE YOU OPERATE

ONE day a lady called on Doctor X. for some minor trouble, and in the course of her conversation said her sister, a beautiful young girl, about twenty years of age, was at a hospital for three months past with a stiff knee. She said Doctors D. and E., two well-known surgeons, had operated on her knee five times in the three months she was at the hospital, but her knee stiffened up just as bad as ever after each operation. She said the surgeons would put her under an anæsthetic and break up the adhesions in the ankylosed knee, but the next day it would be swollen and inflamed and painful, and in a day or two the pain would leave but the joint would be as stiff as ever. She said all this cost her father nearly a thousand dollars.

Doctor X. questioned her as to how her sister's knee became stiff and she said the doctors all said it was due to rheumatism. Doctor X. told her that rheumatism was only a symptom of some other infection and questioned her as to the condition of her sister's teeth and tonsils. She immediately be-

came interested and said she knew her sister had an infected tooth that broke out on her upper gum every once in awhile and discharged pus. Doctor X. told her he thought her sister needed a dentist's care first before she consulted a surgeon. After the lady left Doctor X.'s office she went to her father and told him what Doctor X. said. The father took his girl out of the hospital and the care of the surgeons to his home, and called Doctor X. to see her. Doctor X. found she had a badly infected tooth and also suspicious looking tonsils. The girl was pitifully lame and her knee was ankylosed at an obtuse angle so when she walked she had to step on her toes and ball of the foot. Her father had a dentist extract the tooth and a throat specialist removed the infected tonsils. Doctor X. put her on a general tonic with all the other things that go with it, such as good food and plenty fresh air and rest, etc., and built her up generally, and after two months he took a young physician with him to her home one day and they fixed up an operating table out of the kitchen table, laid her on it, and the young physician put her sound asleep with ether, and Doctor X. broke up the adhesions in the ankylosed knee, working the leg up and down like a pump handle, after he had the thigh bent up on the abdomen. As I say, he worked the leg up and down until it seemed as limber as a normal knee. After this he let the lady come out of the anæsthetic and told the family to let her



rest for that day, but he warned them that the leg would be sore for a week or so, but he would call every day and help her to get some motion in the knee joint. So Doctor X. called every day and in a skilful manner kept up the motion. He advised in his absence that some one should massage the leg with alcohol first, then after with olive oil, and in one week he had her where she could walk on the sole of her foot like any other woman, and inside of a month she went to dances with her young friends and danced as well as anyone, and to-day no one would ever know she was crippled and, not only crippled, but was despondent because she and her family thought she was going to be crippled for life.

The moral in this case is that surgeons should look before they operate.

If there are foci of infection in the system anywhere, very frequently the articular surfaces, such as the knee or ankle joints, have an affinity for the toxins and become inflamed and stiff. It is of no use to break up the stiffness until you remove the foci.

## CHAPTER VI

### ROSE SPOTS

ONE afternoon Doctor X. was called to a married lady who had four small children and who was sick in bed and no one to take care of her or her children, the oldest of which was only seven years of age. Her husband had been called home from his work by a neighbor at the request of his wife. And Doctor X. found by questioning him that she had been sick about ten days and was trying to take care of the home and children until she collapsed, and they sent for the husband and Doctor X.

In this case the first thing he found out was that a lady upstairs in the same house was taken to a hospital a week before and had her appendix removed. To a non-medical mind or even to another physician, this would not seem germane to the case at hand, but not so with Doctor X. He fitted it in with the history and followed it up. After completing his history he proceeded to make a thorough examination. He found the temperature  $103^{\circ}$  F., pulse 100, and respirations 28; he found the tongue coated and red at the edges and tip. It was during an epi-

demic of influenza and many another physician would have influenza in mind. There was no other case in the city of the kind of disease that Doctor X. had in mind. In his observations and physical examination of this patient, he found that she had a large spleen, tenderness all over the abdominal region. Her blood count showed about 6,000,000 red cells and about 5,000 white cells and hemoglobin decreased relatively. He found also what the doctors call a positive Widal. He saw little rose-colored spots scattered about on the chest and abdomen. He saw also an unsanitary home with defective plumbing. So after he saw all this, I believe the reader, even though he or she may be of non-medical mind, would predict that this patient had typhoid fever, but like the story of Columbus and the egg, it is easy when you know, but the physician knows from many sad experiences that it is not so easy and you can see from the thorough manner in which Doctor X. observed everything, that even he took some time before he clinched the diagnosis which was typhoid fever. Then he said:

“Now my main object in telling you of this case is to show a pitfall into which a so-called surgeon fell headlong. If you will pardon my digressions, I want to say a word about many of our medical and surgical brethren that may hurt the feelings of some of the more sensitive ones, but others whom the shoe doesn't pinch will say I am right. There are too



many men with signs that read "Dr. P. Percival Blank, Physician and Surgeon." The American College of Surgeons knows that a man, in order to do major operations on a human being, or to pose as a surgeon, should be one who, after he finished college and had his hospital internship, should go as an apprentice or assistant to a capable surgeon for at least three to five years, before he starts out as a surgeon himself. I say the surgeons know that, but the laity and the government do not, at least they do not insist on having a law to protect the public.

"The field of internal medicine is too large for a man to attempt to be both a physician and surgeon, and life is too sacred for a bungling inexperienced doctor to attempt to do an operation that he probably never attempted before, while there are master men who are doing operations of the same kind every day and the life of the patient might be saved many times by having the man skilled in the technique of operating. Now that I've got that out of my system I'll go on with the case in hand." Doctor X. found that a week before he was called on this typhoid case a surgeon was called to a woman in the same house and he took her to a hospital and removed her appendix. Doctor X. took his typhoid patient to the same hospital and coincidentally she was put in the bed next to the appendixless patient. By "accident" every day when Doctor X. called to see his patient he would pick up the wrong chart

and their temperatures were so much alike that you couldn't blame poor Doctor X. for looking at the chart belonging to another case; in other words, the woman who lost her appendix had typhoid fever from the start and not appendicitis, but she called a "surgeon" instead of a physician and had an operation. This operation was a bad start for the poor woman and she was handicapped in fighting the disease, and finally succumbed to a hemorrhage from the bowels.

## CHAPTER VII

### "THE MEANEST MAN"

WE were sitting in the club one evening smoking and somehow the subject came up about finding the "meanest man in the world." One of the party said that he read in the newspapers about some one finding him down South somewhere; another said he had heard of him being found up North; and another insisted that he was found in the East; and another found him in the West; and Doctor X., who happened to be in the party, said no, that they were all wrong, the meanest man in the world was right here in our own city; that he had found him, and, not only that, but he felt sure that the man's wife was the "meanest woman in the world," and this is the story he told, without giving us any idea who the man and woman were, because in discussing medical cases Doctor X. never mentioned names:

He said he was called one evening to a drug store where they carried a woman who was struck by a street car and who was badly injured about the head. When he arrived an ambulance was there before him, and they were about to take the injured woman to

the city hospital, but when her husband saw Doctor X. coming he told them to take her to his home, which was not far from where the accident occurred.

Doctor X. noticed that the husband of the unfortunate woman seemed extremely happy, he danced around the ambulance giving orders and joking and laughing about the accident as though it was a good joke. When Doctor X. saw the police carry the woman out of the drug store he saw that she was badly injured, or at least looked so from the fact that her head and face were all covered with blood, her clothes were muddy and torn, and her hair hanging matted with clots of blood. When Doctor X. saw the man so happy under those circumstances he first thought that the man was either hysterical from what had happened or that he was drunk, and did not realize the full import of what had happened. But on going with the man to his home to attend the injured woman he found that such was not the case, but that he was perfectly sober and not at all hysterical, but was only extremely happy because his wife was struck by a street car and was so badly injured that he was sure she was going to die and the street railway company would have to pay him two or three thousand dollars for the loss of his "poor dear" helpmate who was the mother of four little children. It is needless for me to say that we all agreed that Doctor X. had found "him" all right. Doctor X. then went on to tell us that when he found



this fellow was so contemptible, he made up his mind that if attention and care could save that unfortunate woman he would give all that was possible for him to give, so he took off his coat, rolled up his sleeves, and scrubbed up and made himself as aseptic as was possible and cleaned off the woman's head and cut the matted hair away and examined the skull carefully and found there was no fracture, only there was a frightful laceration of the scalp that started above her forehead just about where the hair parts and ran back over the top of her head to a point that Doctor X. called the "occipital protuberance." This gaping cut made the unfortunate woman look frightful because the scalp was loosened from the bony skull and fell down over her ears, making her look, as Doctor X. said, like a weasened old baldheaded man with big ears, that sometimes sits in the front row of a theatre when a burlesque show entitled "Paris Milk Fed Broilers" is on. Anyway, Doctor X. said he brought up the flaps of the scalp in apposition and stitched them carefully across the top of the head, using in all twenty-two stitches. Then he swathed the head in a hot boric compress of gauze and bandaged her up. He called every day for three weeks and gave her what care was needed and pulled her through fine, but I'm getting a little ahead of my story.

Doctor X. said when he fixed up this man's wife that night, and came out of the room, he was asked

by the husband "How is she?" And when Doctor X. told him she would be all right in a couple of weeks, all the joy that was expressed on his face disappeared suddenly and his jaw dropped and he became very, very sad. Well, as I said before, Doctor X. attended to her dressings every day and fixed her up fine, took the stitches out and told her she would be all right, and didn't call any more. After four or five months, one day Doctor X. was subpoenaed to court to testify in a trial, Mr. and Mrs. O. B. vs. T. T. Traction Railway Company. Doctor X. appeared at court the next day and saw O. B. and his wife with a number of the neighbors for witnesses, all assembled in the court room, and the trial was on. Mrs. O. B. was looking as pathetic as was possible and moved around her attorneys on two crutches. Doctor X. knew she had not had any injury to her legs and wondered why she was there with crutches. Anyway, there she was on crutches, and her attorney called Doctor W., a bright-looking young, dapper doctor, to the stand and after administering the usual oath, he said he was called to Mrs. O. B. and found her suffering from a badly injured leg. He said the leg was swollen and looked dark from the ankle up above her knee. He said he applied all kinds of "antiphlogistics" to it but couldn't get any results, it always remained swelled and was still as bad as ever. Mr. O. B. was called and he said that while Doctor X. fixed up his wife's



head all right he neglected her leg and that his wife would now be crippled for life and he thought that since she was as good as dead as far as taking care of him and the children, he thought that the railway company ought to pay him \$10,000, which was the amount they were suing for. Mrs. O. B. was called to the stand and said also that Doctor X. neglected her leg and she said she was willing to show how bad it was to the jury, which she did, by lifting her skirt above her knee and pulling down her stocking. The jury all rubbered and craned their necks and saw a swollen thick leg from the knee, all the way down, including her ankle, which looked so edematous that it reminded one of a leg that the doctors call elephantiasis.

Then Doctor X. was called by the railway attorney who subpoenaed him and was asked about the case. Doctor X. told how he examined her thoroughly all over the body, looking for broken bones and cuts, etc., and only found the large laceration of the scalp, which he sewed up. The railway attorney asked Doctor X. if he thought that the woman's leg became so crippled by the accident that happened the night he fixed up her head. Doctor X. said no, because before he was discharged from attendance on her head she was walking around and there was nothing the matter with her leg. The attorney for the plaintiff made some objections to this and called Doctor W. back to the stand, and he swore that he

didn't know of any other way that her leg could have been in the condition it was only from the accident. Doctor X. was called back to the stand again and was asked by the plaintiff's attorney in a cross-examination why, after neglecting the poor woman's leg, he comes in here to court and swears she didn't receive injury to her leg at the time of the accident in question? Doctor X. repeated the word "Why?" "Why?" "Why, because I was subpoenaed," he said. But the attorney wanted to know why he said she didn't have the injury to her leg at the accident that evening. Doctor X. told him she didn't, and said he could prove it now if the plaintiff is willing, and the Court was willing to let him examine her leg right there before the court. The jury immediately woke up and became interested. Doctor X. testified that when she was showing her leg to the jury before that he saw "something," but the jury, while they strained their eyes and craned their necks, saw nothing; even one old rascal got out of the jury box, but he couldn't see. The attorney for the plaintiff inadvertently asked Doctor X. what he saw. Doctor X. said that if the Court pleased he would show on examination of the plaintiff right there what he saw. The Court "pleased" and ordered the examination. The jury gathered so quickly around the plaintiff that Doctor X. could hardly reach her. However, before the plaintiff realized just what Doctor X. was going to do he had her skirts raised up

near her hips, and lo and behold, there was a rubber band wrapped around her thigh about ten times, and the circulation was nearly shut off in her leg which looked swollen and dark from the band which she and her husband applied that morning before she went to court, and which she applied always on the days that Doctor W. was to call on her in order to fool him and use him in the courts when they made up their minds to get damages.

It is needless to say that the case was dismissed against the railway company and the costs put on the plaintiff, and they were subsequently arrested by the district attorney for fraud and false pretense.

You may ask, How did Doctor X. know she had a band about her leg so high up that the court or jury could not see it. Well, he didn't know positively, but the "something" that he saw was the edematous and dark appearance of the leg that made him surmise, knowing the type of humanity he was dealing with, that there must be some constriction to the circulation that was artificial, because edema of the legs from a failing circulation or kidney troubles usually is bilateral and not in only one leg and he knew positively from his first thorough examination of this woman that she received no injury to her leg the evening of the accident.



## CHAPTER VIII

### "THE LODGE DOCTOR"

I CALLED one evening on my old friend Doctor X. as is my custom when I get restless and do not know what to do. I always run over to his office just about the time I think he is through with his evening office hour. He always seems happy to have me call and we light our pipes and lounge around and chat about the happenings of the day, but I must confess that if Doctor X. knew my real reason for my being such a "boon companion" as he calls me, he might not let me in on the secrets and intricacies of his many professional experiences, but I must say that while I love his company my real reason is to get at truths which are the materials I want for my writing. So much fiction has been written on medical subjects that one is amazed at the audacity of authors for the manner in which they get away with it, while facts which would make volumes of wonderful literature rarely reach the public only in a distorted manner through the public press.

Doctor X. said that he was tired and felt some-

what blue and discouraged with things in general and particularly with the conduct of some of his colleagues, and he said he was always glad to have someone in whom he might confide his troubles, which sometimes became burdensome.

I asked him what was on his mind? He said there was a poor fellow who lived in a little cottage up the street a short distance and who had a hard-working wife and seven children to feed, who was in the hospital and had his right leg amputated that day. This poor man was a sober, industrious fellow, and they got along fairly well until finally one day "the thing happened," as Jack London would say. Doctor X. said the man came to him one day and wanted to know what to do for a lump that seemed to bother him low down on the right side near the groin. On examination Doctor X. found it to be a hernia or rupture, as it is commonly called. The doctor told him to go to a capable surgeon, giving him the names and addresses of four or five good, capable men, and have an operation, and then he would be better able to take care of his large family. He went to one whom the Doctor recommended, and this surgeon, who without doubt is a very able man, but didn't know just what the man's financial standing was, made his fee for the operation too high. Doctor X. told me that he knew that if his poor neighbor had confided his circumstances to the surgeon he would

have gone ahead and operated without considering any fee, but sometimes, while people are poor, they are too proud to receive any charity, while there are others who could well afford paying, take advantage of the physician's and surgeon's services without paying; anyway, this poor fellow came home and told his wife of his visit to the surgeon and they made up their minds to let the operating go and wear a truss.

In the evening the man went to his lodge and while there got into communication with his "Lodge Doctor."

He told him about Doctor X. sending him to a prominent surgeon, but the surgeon's fee was too high. The "Lodge Doctor" told him he could operate for hernia and it would cost him only one fourth as much as what the surgeon mentioned as his fee.

In the course of the evening he talked with some of his friends about the ability of the Lodge Doctor and they, being brothers and having a fraternal spirit, of course, naturally boosted the "Lodge Doctor."

So the poor man went the next day to the "Lodge Doctor" and was taken to a hospital—where the "Lodge Doctors" usually take their cases—and was charted for an operation.

By way of digression, Doctor X. said it was right and proper that medical and surgical men got a law



passed which prevents surgeons from splitting fees with physicians who take surgical cases to them, but he told me also that such a law would never have been needed if the internist had more respect for himself and charged a reasonable fee for making his diagnosis.

People should know that the life of the patient is really in the hands of the physician who is called in and if he is skilled enough to make the proper diagnosis, differentiating a surgical case from a non-surgical case, thereby saving the life of his patient, he certainly is entitled to collect more for his services than the price of one visit.

But no, the public seems to think that the surgeon is the great spectacular hero of the hour, who saves the life of the patient, by the dexterous use of his scalpel.

The surgeon sure is entitled to all the glory for performing the operation in a skillful manner, but the internist should not be looked on as an insignificant little fellow to whom you would throw two or three dollars as a tip for coming in and using his scientifically trained medical mind in making a diagnosis on which the life of the patient hangs. As I said before, the internist is more to blame than anyone else for conditions that made this law; if he had more respect for himself he would charge his patient for the responsibility he assumes when he is

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called in to be used as a diagnostician and not send in a bill for an ordinary call.

Doctor X. said, while he never considered the splitting of fees ethical, the public pays the penalty sometimes in a tragic way that he never heard mentioned when this subject is discussed by medical men and the public should know it; that is, since this law was passed a number of unskilled doctors who formerly took their patients to well-known skilled surgeons, who did the operations successfully, now because they have not nerve enough to charge a decent fee for their ability as diagnosticians, and also because of the loss of what the surgeon gave them, they become daring surgeons themselves and thus endanger the lives of hundreds of people who have explicit confidence in doctors who are not skilled.

The public should also know that this law did not protect their pocketbook. They pay the same fee since the law was passed as they did before. And one should wonder why so much fuss was ever made over it.

As a rule, people have to pay a surgeon according to his reputation and according to their financial ability.

Doctor X. told me that he knows two middle-aged ladies, mothers of families, who consulted a daring young doctor, who formerly used to take his surgical cases to a capable surgeon, but since this law

was passed he decided to do his own operations, with the damning result that these two mothers of families now sleep "neath the crosses row on row" while the sun shines on his few successes, but the earth covers his many failures.

Doctor X. said this is a peculiar phase of this anti-fee splitting law, that he never heard brought out and the public—who pays the penalty—should know of it.

To come back to our friend with the hernia, the "Lodge Doctor," whose name Doctor X. said he doesn't even know, came next morning and after the usual preparations in the operating room, and the man fully anæsthetized, began the operation which resulted so fatally to Doctor X.'s poor neighbor.

The "Lodge Doctor" cut down through the skin and muscles to get at the sac of the hernia and in his nervousness, which was apparent to those in the operating room, he cut down through the sac and not being familiar with the anatomical landmarks in this region, he accidentally or ignorantly severed the femoral artery and the blood welled up in the wound like a bubbling spring; then the poor inexperienced "surgeon" fainted and fell on the floor and lay there for a while, during which time the life's blood of his patient was fast ebbing away. However, he "came to," as the women say, and with hot compresses and pressure of some kind cleared the field so that he could ligate or tie off the femoral artery

and stop the bleeding and finished the operation and sent his patient back to his bed. This would have been all right had he not bungled and cut off the circulation in the man's right leg by severing the femoral artery. After a few days the man's leg turned black and he had to have it amputated at the hip or lose his life. This, Doctor X. said, was what made him feel blue that evening, "thinking of the poor man and his family."



## CHAPTER IX

### THE PHYSIOLOGICAL TUMOR

DOCTOR X. told me that when he was a student years ago in Baltimore, Maryland, he had a professor who was remarkably efficient in his line, which was teaching the students at the university the subject of obstetrics. He said that this man was a phenomenon and he owed him a debt of gratitude for the manner in which he drilled them, not only in diagnosis and care of pregnancy, but also in the ethics of this particular branch. He said his professor gave the students a history of every abortionist in the city of Baltimore for a hundred years back and he showed that every one of them ended their lives in a tragic manner, except those that were still alive, and practicing their nefarious business at that time, but he predicted the same ending for them too. Doctor X. said he often thought of those lessons and felt that every man in the chairs of ethics and obstetrics in every medical university should spend more time in drilling the young students in not only diagnosis and treatment of pregnancy, but on the moral side of the question, and



they should show the young men when they leave college that when temptations arise, if they should stoop to the immoral practice of abortion, that their endings would sure be as tragic as the men whose history this professor gave. Some committed suicide, some were in prison, some became so nervous that they were sent to insane asylums; one was shot in his office, another was immoral with one of his patients and her husband pummeled him so badly that he was blind for life; others defaulted; some committed forgery, etc. Doctor X. said this is so in every city as well as Baltimore, because he had been following it up right here in our own city, and he proved it to me by the same manner that his teacher proved it to him. He showed me while there were still some in our city prospering and getting rich at this nefarious business, that all the old ones that were in our midst years ago terminated their lives in a tragic manner, similar to those just mentioned in Baltimore. If this is not a lesson to the young man starting out in the practice of medicine, then he is doomed. One other thing Doctor X. impressed on me, and that was that the great body of medical men are made up of men of good moral stamina, and that it is only a few men, a very few, in every city that fall to this low practice, and those parasites, as he called them, are ostracized from the medical societies, and they are being weeded out now by laws that take their license away when they

are convicted of crime. In the course of our conversation, he got on the subject of how some of his colleagues in another city fell headlong into a pitfall.

Then Doctor X. told me a story so weird that it got on my nerves. He told how one day a lady about forty years of age called on him with a note from a prominent surgeon, asking him to make a thorough examination and report his findings to him. The lady, who was from another city about thirty miles away, gave a history of being married about twenty years, but never had any children. She was a fairly stout woman and said she was always healthy up until the last few months, when she noticed herself getting larger, and she said that she came to the city because she heard of this surgeon being a good man to operate on a tumor, which she seemed absolutely positive was her own complaint.

Her husband, she said, was a sickly fellow and only weighed 110 pounds and was very thin and stoop shouldered; he was a bookkeeper in a large manufacturing plant.

On physical examination, Doctor X. found many things very puzzling. There was no history of vomiting at any time and though menstruation ceased two or three months before, still she claimed that often happened, and that did not worry her. Her whole mind seemed to be set on the idea that a tumor was growing within the abdomen and that she should be operated upon.

After going over her thoroughly, using the different tests and signs for early pregnancy diagnosis, Doctor X. could only elicit one which he found positive both directly and indirectly, and that was ballottement.

Doctor X. told me that it is unusual for women to come to the doctor with the idea that they have a pathological condition, when it is really pregnancy. He said the case is usually the opposite, many women of a psychopathic mind, come to the physician insisting that they are pregnant when they are not. They even are convinced that they are getting larger each week and when the doctor makes examination, he must be on his guard with this type of patient, or she will convince him that she is pregnant and even exhibit signs of pregnancy, which are only hysterical in type. The physician may be able to map out the large uterus, as he palpates the abdomen, but if he takes the trouble to put his patient under an anæsthetic he will find that this "phantom tumor"—as it is called—will disappear and that the abdomen becomes absolutely normal with no signs of pregnancy. As I say this type of patient turns up very often and they are women usually well on in life, near the menopause.

However, in this case Doctor X. became convinced that the lady was pregnant and told her to report back to the surgeon and he would advise her what to do. So when she left he wrote his findings



to the surgeon and when she called on him, he told her that both he and Doctor X. thought she was pregnant between two and three months, and she should not think of having an operation.

She became very indignant and left the surgeon's office furious and said both he and Doctor X. were "crazy," because she had been married twenty years and never was pregnant in her life and now in her "old age," and a sickly husband, she was sure they were mistaken.

So she left the city and went back home and told her husband the result of her visit and he wrote Doctor X. an indignant letter, telling him he had a "hell of a nerve" to charge his wife ten dollars for such a fool diagnosis.

However, on the advice of her husband she went to a doctor in her own town and he was of the opinion that it was a tumor and that she should be operated upon.

So when she came home and told her husband, he said: "Well, you knew that, why didn't you go there in the first place?"

They kept putting the operation off and months went by and the tumor was getting larger, and while they both worried very much about it, they kept putting off the operation until finally one day, they went back to this same doctor and he said she just came in time; if she put it off any longer, she would lose her life.



So he took her to a hospital in that little city and prepared her for operation; he and another surgeon made an incision in the median line down the abdomen, and a large uterus presented itself in the gaping wound, which at first they thought was the large tumor, but when they took this in their hands to remove it, they felt "something" through the walls of the uterus that was strenuously objecting to being removed, and then when their eyes were opened and they discovered it was a pregnant uterus, their faces became blanched with fear, so they quickly pressed the uterus back into the abdomen and with trembling hands sewed up the gaping wound and sent the woman back to bed.

Doctor X. told me that the strangest thing about this case was, that when the woman was first sent to him by the surgeon in this city for examination, she was only between two and three months pregnant, but the doctor in the little town where she lived allowed her to go on to nearly full term without finding out she was pregnant.

A week following the operation, she gave birth to a dead child, probably due to the disturbance.

The lady herself has an abdominal hernia and will probably have it all her life, but she was fortunate that she did not lose her life too.

## CHAPTER X

### "THE MAJOR OF THE MEN OF LIFE"

I CAN always tell by the expression on Doctor X.'s face when he has something on his mind that worries him; he has a habit of twisting a lock of hair while he sits in a lounging chair, with one leg crossed over the other, looking straight ahead at nothing.

One evening, when he was so occupied, I said to him, "What's on your mind, Doc?" He turned and smiled at me, and then got up and found his pipe and filled and lit it and puffed for awhile, following with his eyes the rings of smoke slowly rising in the room which he used as his study, and then said to me, "Well, old scout"—which was a pet name with which he usually addressed me—"you have heard me tell many times about pitfalls that we medical men are always in danger of falling into." I admitted that his tales of the experiences of medical men were always absorbingly interesting to me, and then he said that Doctor "Blank,"—mentioning a prominent surgeon of national reputation,—and he had been saved from going over a "precipice"—he called it—by a young interne in the hospital who

had not even received his license to practice medicine yet. When he saw me looking surprised he told me the following story:

A middle-aged lady called on him one day to find out what was ailing her and Doctor X. said he noticed when she first called that she was somewhat jaundiced and her face looked flabby and wrinkled where the lines before showed that she was naturally fat, but something must be wrong because she was fast losing flesh. This he found was actually true from her subsequent history. Her family history was negative, except that they were all inclined to be obese. She was a woman about fifty years old and had two sisters living, one younger and one older than she. She was married and had seven children, three of which died in infancy. She had one miscarriage. Her husband was living and well and was an engineer on the railroad. Doctor X. said he examined her and found that her legs were somewhat swollen and her heart was beating hard and fast and her blood pressure was quite high, about 160 systolic, but when he was examining her about the abdomen he saw "something" or, as he put, he thought he felt "something." After going over the patient in a thorough manner, as was his custom with all patients, he found her so debilitated and exhausted that he advised her to go to a hospital for further study, as it was his opinion that he would have to call a surgeon to operate. After he had her



in the hospital she improved somewhat and Doctor X., with a prominent surgeon, went over her together, and they found what seemed to be a lobulated mass protruding down under her ribs on the right side. So with the history of such rapid emaciation and the jaundiced appearance and swelling of the legs, and her age, etc., they came to the conclusion that the mass felt was a malignant growth that necessitated immediate operation. Doctor X. said that her condition became so grave after a day or two at the hospital, although it improved the first day, that they didn't have time to take tests of her blood and urine. So they thought they would go ahead and prepare her for operation.

The surgeon was all ready and Doctor X. said he was there only out of curiosity to see the cancerous condition of her liver, which was their diagnosis, and for which they were to explore. When the interne came to give the anæsthetic he saw Doctor X. standing around waiting, and asked the doctor if this lady was his patient, so Doctor X. said yes, but she belonged to the surgeon just now. Then the interne, who was sitting on a stool at the head of the operating table, beckoned Doctor X. to come and have a look at the patient's head, which he did, pulling the hair apart in different places. He was astonished to find four or five large gummatous lesions scattered around at different points on the scalp, a condition that he



never noticed before because in this case the lady said nothing of those sores, but Doctor X. said that he "got what was coming to him" because he neglected for the first time in his life to start at the top of the head of a patient and finish the physical examination at the top of the toes. Doctor X. called the surgeon from the wash room and showed what the interne discovered, so they made up their minds that the same thing that caused the gummatous lesions on the scalp was the cause of the lobulated mass at the region of the liver, so they decided not to operate because the condition was syphilis of the liver which immediately responded to anti-syphilitic treatment. The patient recovered her strength and as she gained weight again all the symptoms cleared up, her swelling left her legs, but before she left the hospital Doctor X. examined her blood and found what he expected, a positive Wassermann test, which proved she was syphilitic. And when I asked Doctor X. if he thought she would have been under much risk if she did have an operation with such a skilled surgeon, he told me she never would have gotten out of the operating room alive, because since that day he found both her blood and urine loaded with sugar. She had diabetes complicating syphilis, and a stout diabetic of this type usually dies on the operating table. So that was how a young interne saw "something" and saved a lady's life. And I often think that the late la-

mented Osler was too modest when he used Bunyan's phraseology applied to tuberculosis, that pneumonia was the "Captain of the Men of Death" when he didn't add that the physician was the "Major of the Men of Life."

## CHAPTER XI

### "THE NIGHT DOCTOR"—"VULTURES"

ONE night I found Doctor X. in a very jolly and carefree mood. He said his reason for feeling happy that evening was because he found all his patients doing well and could rest one night anyway without fear of being called out. He said to me he wondered why some young doctor, when he finished school, didn't start out for a year or so as a "night doctor."

Doctor X. said he was sure there was a fortune in store for the ethical young doctor who would employ someone to attend his telephone and take calls as they came in while he would be out making a call. He could get a double fee for every call, he could send out cards to every physician in the city stating that he would make their night calls and turn the patient back to the family physician next day, as the night doctor only was to make calls between 7 P. M. and 7 A. M. Doctor X. said the man who will do this in every large city will get rich in a few years, because night calls will be cash and he can get all the way from \$3 to \$10 a call from people, according to their means. Doctor X.

said he would give the "night doctor" on an average seven calls a week where now he has to turn over calls at night to young men who are competitors during the day. I thought the plan was a good one and wondered why some young man never ventured on it. After a year or two Doctor X. said the man would have wealth enough to go and take a post-graduate course in some large medical school and branch out in any specialty he wished. Doctor X. said there are hundred of doctors in every city who don't want to make night calls and if he could give on an average seven calls a week you can imagine what the others would give when they knew there was a man in the city who specialized as a "night doctor."

In the course of our conversation we drifted onto the subject of quacks and their methods of fooling the public, and Doctor X. told me that if the public would write to the American Medical Association, 535 North Dearborn St., Chicago, and obtain a copy of a book entitled "Nostrums and Quackery," they could find therein an extremely interesting exposé of every "fake medicine" and every "fake doctor" in the United States for the past twenty years. I happened to see a copy of this book in the doctor's waiting room one day and in glancing over it found a fake remedy that a stout lady friend of mine was telling how she was "cured" of gall stones by taking it. The description of the manner in which



the "fakers" exploit this cure would be funny if it were not for the fact that so many tragedies happen to poor dupes who fall for it. This friend of mine thought she was cured by it, but Doctor X. said the only way to be cured of gall stones was to get into the hands of a good surgeon, because there is absolutely no medicine that a doctor or anyone can give that will make gall stones pass, although he said gall stones sometimes pass but the condition that makes gall stones is still there, and the victim of gall stones is always subject to another attack. He said many people have them all through life without much suffering, but they are always in danger of becoming septic or by irritation over a long period might start up a cancer of the gall tract. This same lady friend of mine has had two attacks since she had claimed to be cured. I can't resist the temptation of telling how this fake gall stone cure is worked on the poor unsuspecting public. Doctor X. said it was made up of about six or eight ounces of olive oil disguised by a trace of anise oil so the people will not know it is olive oil, then there is a Seidlitz powder that goes with it, under another name, to augment its laxative effect. The poor dupe takes all the oil at bedtime and is instructed to take the powders early next morning.

Doctor X. said this is what happens in the victim's system: Soapy concretions are formed by the action of the Seidlitz powder on the oily contents

of the intestines; these are rolled into little round green balls by the peristaltic action of the intestines. The victim thinks she has had anywhere from twenty to one hundred gall stones, which of course are not gall stones at all. So when she sees them it leads her to think that she has gotten rid of her trouble and she runs and tell her neighbors about the wonderful cure she has found, and this goes on like an endless chain, and the fakers grow rich and fat and when the dupe finds out she has been humbugged she can't go back over her tracks and undo all the boosting she did for the fake, and it goes merrily on.

Doctor X. told me of another unscrupulous faker who exploited a "cure" for Bright's disease. He said this faker conceived a damnable spectacular idea of making every victim think he had Bright's disease. He said this vulture sent out free to his victims a small vial of a weak solution of silver nitrate, whom he told could make their own urinalysis by adding the contents of the vial to a small quantity of their urine. The quack told them if they saw a "white precipitate" after adding the contents of the vial, they had Bright's disease. But Doctor X. showed me by an experiment right in his office that there is a white precipitate in everybody's urine, formed when you add a weak solution of silver nitrate because the chlorids naturally present in all urine causes a white precipitate. When the victim

sees this he naturally thinks he has the disease and adds more to the vulture's exchequer by buying a bottle of his "fake cure." Doctor X. said this is all exposed in the book called "Nostrums and Quackery," published by the American Medical Association, and the only way to stop this and other nefarious frauds is to get this volume into the hands of the general public.

## CHAPTER XII

### ALL THE WIVES WONDERED

DOCTOR X. said to me one night, "You cannot imagine, Old Scout," the number of unique and bizarre types of pitfalls that are ever yawning their abysmal depths to medical men, ready to gulp the unwary physician or surgeon, much in the manner of "Lisbon Town, when she saw the earth open and gulp her down."

Then he told me of an unsuspected pitfall into which a good friend and very capable and respected colleague of his was innocently precipitated. I say, "innocently" because Doctor X. told me, that it was really through the kindness and goodness of his colleague's heart that he was led to mistake trickery for modesty which was assumed, and thereby neglected to subject a sensitive patient to a critical examination, because he had known the man for many years and always thought him to be of an exemplary character.

This subject came up one night when we were discussing medical topics, especially the live question "Eugenics" and "Eugenic Laws" passed by sev-



eral states, and after arguing the subject pro and con Doctor X. told the following strange story:

Going back some years, he told how one evening he was called to a lady who was nervous and hysterical from the manner in which she said her husband treated her. Doctor X. said he noticed she was of a neurotic type and jealous of her husband, whom she claimed was running around nights with another woman. She said, "If he didn't look out she would fix him." And every once in awhile his patient would say: "Oh, if they only knew! If they only knew!" Doctor X. attributed this outburst to her hysterical tendency and paid little attention to it at first, but when she repeated it so often he finally asked "If they only knew what?" All the answer she gave was, "You're a doctor, you ought to know. Haven't you seen him?" Doctor X. told me he couldn't make much out of the case but attributed the whole thing to what he called "Psychopathic condition," but after being called to the patient again and heard her repeat the peculiar phrase "Oh, if they only knew," his curiosity was aroused, and he went into the other room where the husband was smoking a cigarette and playing solitaire at a table, with his cap set jauntily on the back of his head. He said the husband glanced or "flashed" two black eyes at him quickly and smiled, showing a double row of white teeth, and said in a sort of tenor-alto-baritone voice, "What in the hell is the

matter with her?" And then Doctor X. saw "something" and said to himself, no wonder she says "Oh, if they only knew!" This was the first time the doctor saw the husband, and he told me he lay awake most of the night thinking of what a strange, weird, psychopathic, phenomenal case he had on his hands.

Doctor X. said he made it his business to follow up the husband and find out all about him since the time he came to the city from another state some years before. He found that he worked in the office of an industrial plant and was quite popular with his fellow workers; also his employers had no complaint to make, as he did his work well, even though he run around nights. He seemed to have provided for his wife fairly well for the salary he was getting. Doctor X. smiled when he told me how this fellow went on week-end trips with his fellow workers and their wives to a nearby lake. The men bunked in the attic of the cottage every night, while all their wives slept downstairs. He entered into all sports, such as baseball, fishing, boxing, gambling, smoking and drinking; in short was a happy-go-lucky and jolly good fellow all around, and always ready for any old game he could get in on.

Doctor X. said he noticed that he and his wife were becoming more and more estranged and she seemed to suffer mentally from the estrangement, and wanted to keep him and begged Doctor X. to use his kind influence to make him come back and

support her, but he said he couldn't make him see his duty; in fact, he told Doctor X. she was not his wife, that he was going to marry another, "a better housekeeper," he said. All this time Doctor X. said he did not like to mix in their peculiar family affairs, but he told the fellow that if the "something" that he recognized the first time he ever saw him was true, he would have one hell of a time getting married in this state. The fellow only "flashed" his two black surprised eyes on him again and said in a casual way, "Leave it to me, Doc."

I asked Doctor X. how he would have a hard time getting married in this state, and the doctor said that we had a "eugenic law" in this state and any man who wanted to get married had to have a certificate from a physician stating that he examined him thoroughly and found he was free from all venereal diseases. I said: "Good heavens! Doc, was the villain diseased?" Doctor X. looked at me and said, "Old Scout, if you only knew! Oh, if you only knew! But it isn't ethical for any medical man to say anyone is diseased or not diseased, but it will not be the disease—if he has any—that will prevent him from getting married in this state." That's how Doctor X. left me, wondering and puzzled about his psychopathic case that night, and I heard no more about the case for a few months, until I was startled by big black headlines in all the newspapers, and I ran over to Doctor X. and showed him the



papers. He said he had all the facts, or most of them, beforehand and told me first hand how the thing happened.

He said the woman, who was his patient, was not this party's wife, of course "couldn't be"; that they both came from another state to this state where they were not known. The "husband" was a capable trained nurse in the other state but got it into her head that if she masqueraded as a man, a married man at that, they could live better, and she could make more wages and the "wife" could stay home and cook and keep house. Doctor X. said there was at first an unnatural love between them but that wore off as time went on and the "husband" developed another unnatural love which eventually became her Nemesis. When she left her first paramour she thought, "Now if I marry the other, the first one cannot have any claim on me." But that's where she met her fate. The first one, when she heard of her "husband" being married again, ran to the police inspector and told her strange tale, which I dare say astounded the police officers. Then they began to wonder, as Doctor X. was wondering, since he heard of the new marriage "where in the hell did he, or she, get the marriage certificate?" "And all the world wondered," and all the wives wondered, "and into the mouth of hell," into the fathomless pitfall, rode the doctor who blundered.



## CHAPTER XIII

### "THE HIPPODROME"—"NO DOCTOR"

ONE night we were talking about the psychology of the public mind with regard to advertisements by which quacks fool the public, and Doctor X. told the following story on himself, although he was entirely innocent of any advertising:

He said for a long time he kept a prominent orthopedic surgeon busy with hip cases that were coming to him. He said women would come nearly every day with their children and always there was something wrong with the hip, either tuberculous troubles, or congenital dislocation, or something. So he said that he would always refer the cases to a man who knew more about the cure of these troubles than he did.

Doctor X. said he noticed that this hip business started suddenly, as for years before he never noticed that he had many of this class of cases consulting him, so he asked a number of women how they came to consult him with regard to their children's hip disease, but they would say some neighbor told them that he was a "hip doctor," but Doctor X. always

told them no, he specialized only in internal medicine, and he then referred them to the orthopedic surgeon. Still the cases kept coming and coming, and when he would meet the surgeon, as he did occasionally at the hospitals, the surgeon would say, "X., Old Scout, where the hell do you get all those hip cases you send to me?" And all Doctor X. could say was, "Damned if I know; I've been trying to clear up the mystery myself, but it is beyond me." So the thing went on, and there was no let-up, the hip cases kept coming. But finally it was getting on Doctor X.'s nerves. He began to think there must be some way that the mystery could be solved, so he questioned his patients more in detail, how they came to call on him, why they didn't go to an orthopedic man, but would always get the same answer, and that was that a neighbor or friend sent them who said he was a "hip doctor."

So finally one night, after office hours, a colleague of his came running in and said, "Come on, X., let's go down to the 'Hip' and see the prize fight." Doctor X. said he looked at his friend and couldn't speak for a minute, and his colleague said, "Gee! what's the matter? Aphasia?" Doctor X. said, "No, I just saw 'something,' but what a 'puddin' head I must be not to have seen it before." There, outside Doctor X.'s office was a large, electric sign on the main street which read "H I P" which was hanging right under X.'s modest sign. The "Hippo-

drome" where the prize fight was to take place was down the street some distance from the corner where Doctor X. had his office, and they placed this abbreviated sign to direct the public. Since then Doctor X. said he believed "in signs" and he was sure the public did too.

Then, after we had the laugh out on Doctor X. he told us of a peanut vender who used to keep a peanut stand at the entrance to the building where a quack was doing a thriving business. This peanut vender was a sort of a mongrel, who "shivered for a cent." Anyway, this fellow, standing all day at the entrance used to see many dupes go up and down and he thought to himself, "Gee, that fellow upstairs is making dollars where I am only making pennies." So he conceived the idea of getting into the doctor business himself. Doctor X. said the tragic part of the story was that this scheming mongrel got away with it for nearly two years before he was arrested, after he robbed and nearly poisoned many of the credulous fools who run to quack doctors.

Doctor X. told how this peanut vender rented a room in the same building in competition with the other quack, while his wife continued the peanut stand downstairs. He had his wife trained to steer victims to the room in which he was trying to "play" doctor. By the way, this idea of steering victims was the thing that first started the plan in his head to be a doctor. So many people used to stop at the



stand and look around and finally ask him where is that Doctor W. that cures "everything," and of course since he could do that for the other quack, his wife at the peanut stand could do it for him. So he rented a room, as I said before, and hung out a "shingle" with his name on it and the word "Doctor" on it too. But the reader will realize what a rogue and scheming faker he was if he studies this "shingle" or sign closely. It is awfully hard to write a description of this sign which the peanut vender displayed to the public, letting them know that now instead of selling them peanuts he would cure their ills by selling them medicine. So before I come to the description of the sign I'll tell what happened.

As I said before, this peanut vender robbed many victims on promises to cure anything at all that was the matter with them; in fact, he advertised in the newspapers that he was a "specialist" in everything. The other quack was afraid to make a complaint to the "powers that be" because he couldn't come with clean hands complaining of this new quack, so the thing ran along and he was coining money upstairs and his wife continued the peanut business downstairs, not for what she made out of it, but to be on duty to direct victims up to her husband. Finally this wife of his became his Nemesis. She began to notice that very many women were asking her where her husband's office was located, and the wife began to feel the "green-eyed monster" of jealousy



taking hold of her, and she became very watchful. This peanut vender not being drilled in medical ethics and having a low standard of morals began to be familiar with patients and naturally he eventually came in contact with a female patient whose immorality equalled his own, and his wife caught him redhanded. The scene that took place is indescribable. Pandemonium reigned around the whole neighborhood, people passing on the street stopped and gathered around the entrance asking, "What's the matter?" when they heard weird, wild yells emanating from the windows of the faker's office. So finally the police took a hand and bundled faker with his paramour and wife into a police patrol and they delivered the "triangle" at the station house.

Doctor X. said that it is strange how the "powers that be" allow medical fakers to go on in their nefarious game of robbing and poisoning people until something happens that brings them into court and then they ask, "How did this fellow come to be a doctor?" That's just what the authorities did in this case, and they brought a charge of practicing medicine and hanging a doctor sign out without a license.

When the state tried to prove he practiced medicine they couldn't get any of his victims to testify because of the notorious character of the case. So, the state set out to prove that he had a sign hanging out signifying that he was a doctor, but the defendant's attorney denied this to the court's amuse-

ment. So the sign was brought into the court by the state in order to prove to the jury he posed as a doctor, and this is how the sign looked to the jury:

NO	DOCTOR
515	BLANK

After the jury saw this sign they wagged their heads, as much as to say, this sure is a doctor's sign. But the defendant's attorney called him to the stand and after the preliminary questions asked the defendant if he hung out a sign telling the public he was a doctor. He said, no. Then his attorney asked him if he hung out a sign telling the public he was not a doctor. He said "Yes." Then he told him to tell the court and jury how he was such an honest man that he always wanted his patients to know he was not a doctor. He told them he put the sign out especially for that purpose, and if they noticed the top line of the sign said he was "NO DOCTOR," and the 515 was the number of the office. Doctor X. said the worst part of it was this fellow was freed from the charge which the state had against him, but his wife punished him. I asked Doctor X. what this case had to do with "pitfalls" and he smiled and said that had reference to the pitfalls into which the public and lawyers are being precipitated.

## CHAPTER XIV

### "TWINS—VERY MUCH ALIKE"

WHILE I am on the subject of quacks I must tell you a story about how I investigated two quacks who did a land office business in this city for years and grew fat and wealthy on their victims. They occupied a suite of offices in a prominent building and sent out glaring advertisements in all the papers in the city and surrounding cities and villages throughout the state. These two crooks were twin brothers, and looked so much alike that when a victim would accuse one of them he would always find some way of proving an alibi. In their advertisements they made it always appear that there was one "great specialist" in men's diseases, which they made their graft. It was Doctor X. that put me wise to these two fakers and asked me one evening if I would go and pretend I was sick with some trouble peculiar to men and see the manner in which they conducted their nefarious game. Doctor X. warned me not to let them get any money from me and I was surprised at his warning until "run the gantlet of the crooks," to tell the truth they nearly



got my pocketbook. Anyway, I called one day and as I stepped off the elevator a suave, polished-looking fellow, who seemed to be on the lookout for victims, in other words, a "runner" for the fakers, asked me if I was looking for the great specialist, and when I said yes, he ushered me back through a long corridor into a waiting room, where there were a number of dupes waiting their turn.

After he closed the door and went back to his post at the elevator, I was trying to see if I had any gift of perception like my friend, Doctor X., but the place got on my nerves and I know there were many things that I missed, but I'll try to tell what I saw. I first noticed that no one could leave the waiting room without going through the rooms occupied by the specialist and his assistants, so after waiting awhile I thought I would go out and I managed to get past the first room in which a young man was questioning a patient and by the time I reached the next room a big professional-looking fellow, who was none other than the great specialist himself, stepped out and said, "What's your hurry? Just sit down; we will look into your trouble next." Well, I thought all right, so I went back to the waiting room and waited until someone came in and said, "Where's that young Colonel who has to catch the next train to Washington?" No one got up, but they all looked at each other. Then he said, "I mean the one the great specialist said he would take



next," so I arose and went with him, although I was tempted to tell the dupes in the waiting room that I was not a Colonel and not going to take a train for Washington, but I thought better of it, and followed the young man into the first office where he took my "history" and asked all kinds of questions particularly about my financial affairs, which I stretched out a little so they would think they had a good rich victim. I told him I had some minor ailment that men are apt to have and he looked wise and said that was too serious for him to tackle, I better see the great specialist. Then I heard a shuffle through a thin partition, like some one slipping out of the next room quietly. After a little while the first "doctor" who took my history led me on through two or three offices fitted up with "fake cabinets" and "fake" X-ray machines, etc., until we came to the great wise specialist seated at a mahogany desk and poring over a ponderous volume of science. I was introduced to the same man that impeded my exit some time before.

So the "doctor," who is really nothing more than some young man employed, left me in the hands of the faker and went out. I said to the specialist that I saw his ad in the papers that he gave free consultation, and I thought I would consult him and get his advice, and if he would cure me I would pay him. He said, "Your trouble is quite serious," but he could cure it, and he launched out into a description of

what was the matter with me and told me the name of my trouble, said how I only had a short time to live unless I would take his treatment. I asked him how he knew I had the trouble, he didn't examine me. He said, "My dear man, I can look into the eyes of any patient and tell just what is wrong with him. I cure hundreds of your kind of disease every day." Then he told me I should pay him twenty-five dollars now and sign this note and he pushed a legal-looking paper under my nose, all the time talking, telling what a dangerous trouble I had and how simple it was for him who was the only living specialist that could save my life. I saw that this crook worked his victims by trying to overawe them and use his persuading personality to extract coin from the victim and make him sign up, giving fake guaranties of cure, and believe me, he was getting on my nerves and I was beginning to feel that I would part with some of my roll to get out of his clutches. I refused, of course, to sign with the excuse that I would come again. He stood up over me and said, "Well, my fee for this visit is twenty dollars and I'll deduct it from the price when you take my treatment." But I said, "Doctor, you advertise that consultation is free." "Oh," he said, "that's for the advice you get from the first doctor. I must have my fee; I've been examining you since you entered this office." I said, "Yes, and you've been eavesdropping the other side of a thin partition in the first office, and then

when you heard what I told the young clerk you have there you sneaked back here to make a victim. Now you let me out, you big faker, or I'll have you in jail before you realize who I am." Oh, I was brave, but all the time I was shaking in the knees. When I told him I had no such trouble and just wanted to see his system of working the dupes, he threatened to have me arrested, but I put on a bold front and beat it. That's how this faker nearly got my money. I told Doctor X. and we had a good laugh over it. Doctor X. told me he knew of a poor fellow who had an incurable trouble—and men with incurable troubles grasp at any last straw,—who went to the great specialist, who gave him a written guaranty to cure his trouble in three months for three hundred dollars, and after the first month the man complained that there was no improvement. He said that the faker told the poor victim there was a certain apparatus he had to buy to use in his special case and that would cost him three hundred more, and again he gained the confidence of this poor fellow who was anxious to be cured, and he gave him the three hundred, making six hundred. Then the faker bought some kind of cheap apparatus and used it in his bluff treatment. When the three months were up there was no improvement and the faker again told him how, in order to complete a cure, he should have his "mechano-therapeutic device" that would absolutely cure him, and again



gained this poor fellow's confidence and got five hundred dollars from him, after the poor fellow mortgaged his little cottage. When the poor fish's eyes were opened and he was left penniless with a mortgaged home and unable to work and his wife and children in want, he went to a lawyer who started suit against the quack and got the case into court. The crook that got the eleven hundred dollars wasn't to be seen at all, but the lawyer and the dupe discovered they were trying their case against a fellow who looked like the crook, and this fellow was none other than the twin brother who was somewhere in California at the time the dupe was taking his treatment. Of course they could not convict one brother for the actions of another.



## CHAPTER XV

### "CUM GRANO SALIS"

DOCTOR X. said one evening, that he noticed many times in the clinics when he and his students were taking histories of patients that happened to have any defect, such as being cross-eyed or clubfooted, or curved spined and hunchbacked, in fact anything out of the ordinary, the patient or the mother or any members of the family who happened to be with the patient would always blame it on either the nurse or the doctor who was in attendance on the patient some time. If the patient happened to be a hunchback they usually said "the nurse 'dropped' him when he was a baby." If it happened to be a clubfooted patient, they always said the doctor twisted the foot some way at the time of birth. Usually they blamed cross-eyes on something running in their eyes when they were small. Doctor X. said that those people told the story so often in making excuses for defects in their own children that they really believed it themselves, and a doctor always had to be on his guard and take such stories "cum grano salis."

He said one day he was called to a little boy about four years old, who had been taken home from a hospital where he was treated for an "injury" to the hip and was kept in plaster cast in the hospital for six months. Doctor X. obtained the following history from the parents:

They said about seven months before, the boy was playing with other children in a building that was under construction and that he fell through or between the joists in a part of the floor that wasn't finished, into the cellar. When he was helped out he said he wasn't hurt much and had only scraped his leg a little. The parents said they made him stay in the rest of the day, but he played around the house all right and wasn't even lame. During the night the child became delirious and developed a high fever and vomited often. They said he was thirsty and when they would give him a drink of water or milk or anything he would "shoot it back in their faces."

This expression Doctor X. said gave him his first clue that caused him to doubt the boy was injured. The parents said the boy's fever seemed to be down in the morning, but if they attempted to touch his hip or leg anywhere he would scream and then they called a doctor. The doctor was a capable man, but placed too much confidence in what the parents told him in regard to the "injury" the day before. He took the boy to a hospital and put

him under an anæsthetic and applied a plaster cast to the hip. As time went on and the boy's leg was much smaller than the other, he attributed it to the fact that it was immovable during the six months that it was in the cast. When the cast was removed and the boy sent home, Doctor X. found, from a thorough examination of the boy and from the history of the case, that it was really a case of infantile paralysis, which had been treated for an "injured" hip.

The surgeon who was called first had his attention drawn too much to the fall the day before, which was only a coincidence. Doctor X. found that the boy had a typical flail-leg that is only found in infantile paralysis, and he said this condition was more exaggerated because of the fact that so much time had passed without the boy having the benefit of the care of a good orthopedic surgeon. Doctor X. said that this case was one of the many that was referred to him at the time the hippodrome or "Hip" sign was displayed by the Hippodrome Company outside his office, and he referred the case to a prominent orthopedic surgeon who verified his diagnosis of what happened seven months before.



## CHAPTER XVI

### "RATIOCINATION"—"A POET'S SIGN"

SINCE I've been in the habit of dropping in on Doctor X. after his office hour in the evening, I've been startled many times by the manner in which he reaches conclusions and solves difficult problems that to another mind would seem to have no solution.

One night I asked him how he came to be so adept that he had the reputation of being always correct in his diagnosis. He looked at me, and smiled, and said, "Old Scout, you surely kissed the 'Blarney stone.'" But, he said, that while he made mistakes too, as well as anyone, if I wanted to know how he happened to be correct in cases that seemed difficult to others many times, it was due chiefly to constant application to study of books on "Physical diagnosis" and his experience in the clinics describing the variety of peculiar cases that frequent clinics, to the students, and, secondly, to what Edgar Allan Poe called "ratiocination." When he mentioned ratiocination, my mind went back to somewhere in Poe's literature, I think it was in the "Murders of the Rue Morgue," where I read of "Dupin"



being gifted with this process of reasoning, but whom I could not just recall to mind before the mention of the word ratiocination.

I was surprised this same evening at an exhibition of his skill, which to me seemed to border on the supernatural. I happened to be in the drug store before I went to the doctor's office and while I was talking to the druggist a middle-aged man came in and asked the druggist what kind of a doctor was Doctor X.? He said he was a total stranger in the city and wanted to consult a physician. I heard the druggist tell him he would make no mistake in consulting Doctor X. and the man asked if he was in his office now, and when the druggist said yes, he said he would go and see him. I left the drug store and went to the Doctor's office, and after some time the thought struck me to tell him a man who was a stranger in the city was coming to see him, and in order to test him out on his "ratiocination" I bet him a good cigar that he could not tell anything about this fellow, as I had seen him do many times before with patients when they first came in the office. He laughed and brushed back his hair and said, "Well, all right, maybe I can't, but I'll accept the bet, if the cigar will be a better one than the last one you gave me."

About this time the man came into the waiting room, and I watched him and the doctor closely. The man said, "Is this Doctor X.?" and stood wait-

ing, not knowing which one of us was the doctor. Doctor X. stood for a period of about ten seconds looking at him closely, and then stepped forward and said, "Hello, Schultz, I'm sorry you lost your mother recently, didn't you? You called to see me about your heart, didn't you?" The surprised expression on the man's face was only equalled by my own, but I feared, or at least had a suspicion that he knew the man but found out later that wasn't so. I heard the man say, "Why, doctor, how did you come to know my name? I'm a total stranger here and just came to the city today; and my mother too, that surprises me most, she died only——" By this time Doctor X. had him inside the private office and I couldn't hear just when she died, and Doctor X. in shutting the door looked at me with that fascinating smile of his and said, "Go get that cigar now, and a good one too."

So I went out while the doctor attended his patient. I bought the best one I could find, and the druggist looked surprised too.

After the patient went away we lighted our smokes and Doctor X. said, "Gee, Old Scout, you did blow yourself this time." We settled down in his cozy upholstery and he saw that I was showing by my actions that I was impatient to know how he did it. He said, "It's the simplest thing in the world; any doctor can do it, especially if he cultivated the faculty for it." He said it helps wonderfully in

medicine. In fact he kept teasing me for a long time, but finally I got it out of him by insisting that he had some supernatural gift for it. But he said, "Ah, rats, no!" And then he told me how simple it was.

"First, you noticed that fellow had in his upper left hand outside pocket a letter, and just above the seam of the pocket were the letters —ultz. Now, what do you think that fellow's name was or is?" I dare say I was dumfounded. Doctor X. laughed at me and said, "Now, isn't that simple?" I had to admit it sure was, but I was thinking to myself, who else would see that. Doctor X. said, "Well, Old Scout, you didn't answer my question." So I said, of course his name is Schultz. "Well," he said, "there you have it." I said, "But, Doctor, how did you know about this fellow, who was a total stranger to you, losing his mother?" He looked at me with that smile and said, "Simple as finding that his name is Schultz." Then he asked me if one of my parents died, which one would I put a crêpe on my hat for? I said, "Well, I'll be d——d, of course my mother." Well, he said, "There you have it, you sure noticed that this fellow had a crêpe on his hat." I didn't notice it, but when I met the fellow again I saw he was wearing crêpe on his hat. But Doctor X. saw that I was anxious to know how he knew the fellow consulted him about his heart trouble. And when I asked him about that he said "Well, I couldn't



expect you to know, but any doctor should see it," and he told me that on examination of the patient he corroborated the first diagnosis he made immediately in his own mind about just what was wrong with the man's heart when he first saw him.

And believe me, this seemed to be the greatest mystery to me. And, to add more mystery, Doctor X. said he had Louis Charles Alfred de Musset, a French poet, who died away back in 1857 at the age of forty-seven years, to thank for his diagnosis of this fellow's heart trouble.

Then Doctor X. told me that every patient who is really sick and consults a doctor always "thrusts forth" some symptom or group of symptoms to a doctor, and if the doctor is wide-awake he will get those "presenting symptoms"—Doctor X. called them—every time, and have a clue to work on. That seemed very plausible, but it was mysterious and remarkable to me. He said, "Now, if you noticed this fellow when he said, 'Is this the doctor?' well, he seemed to be out of breath, or have 'dyspnea' as medical men call it." I admitted I noticed that. "Well," Doctor X. said, "that wasn't all, I couldn't form a conclusion from that alone. He might have been asthmatic. You might have noticed, while he stood there awhile waiting he had a rhythmic-like movement of the head, synchronous with every pulsation of the heart. This nodding movement of his was due to what is called aortic regurgitation which is the dis-



ease from which this poor fellow is suffering. This rhythmic movement is called 'Musset's sign,' after the poet who discovered it in himself, and the disease from which the poet died in 1857 was aortic regurgitation."

## CHAPTER XVII

### "A GURGLING SCREAM"

MANY times you see criticisms and complaints in the newspapers about local and national detectives bungling and blundering in murder cases. The criticisms are made usually by reporters who are anxious and too officious in finding a "scoop" for their papers. So when the detectives or police inspectors refuse to let them know all the facts, they go away with the determination of "getting the bulls," as they call them, and then write many things that are not facts, and this sometimes sways public opinion against the men who protect our homes and lives from human fiends, gunmen, and other prowlers of the underworld. We were talking on this subject one evening and I asked Doctor X. if he really thought the police and detectives deserved such criticism, and he told me that he was astonished sometimes at the efficiency of those officials, in ferreting out the criminals in difficult murder cases and robberies when he considered the difficulties under which they worked. He said when the police department goes into a pitfall and blunders in arresting innocent

victims, it is due many times to their being dragged in bodily by coroners or coroner's physicians. He told me that the average coroner's physician was a man who paid a great deal of attention to politics and very little to scientific medicine.

Then Doctor X. launched out into a story that gave me a creepy feeling and caused me to have weird dreams that night from which I would start up out of bed in a sort of nightmare.

He told me how, some years ago, he was called one beautiful July morning, between four and five o'clock, to a young married lady, who was found lying on the floor of her kitchen where she was preparing breakfast for herself and her husband, who worked as a clerk nights at one of the hotels, apparently murdered. Doctor X. said when he arrived some of the neighbors, mostly women, and one or two men, were already there, and what he gleaned from the stories of those people was that they heard a door bang two or three times and a peculiar "gurgling scream" as though someone was being "throttled" or choked. The houses were built close together and it being a warm summer morning the windows were open and they were all sure of the sounds as they described them. One of the women said after the noises stopped she couldn't sleep and she got up and dressed and went to the house from whence the noises came. The back door was closed, but it was unlocked so she opened it and stepped into

the kitchen and was horrified to find such a grewsome sight, so she ran frightened to some of the neighbors and aroused them, and called Doctor X. This, Doctor X. said, was all that this lady knew, but another said she heard footsteps on the walk between the houses like someone walking in a hurry, and this occurred just shortly before she heard the peculiar banging sounds and scream. She said it was in a neighborhood where there were so many screams that she didn't pay much attention to it, but she was sure of the footsteps. The men didn't hear anything until their wives aroused them, so they stood around mute. Doctor X. said he noticed the floor was spattered with blood, the woman was lying near the gas stove and there was a chair upset beside the table. The table contained part of the breakfast she was apparently eating, and a clean plate with cup and saucer which was set for the husband who had not yet arrived. He said the unfortunate woman's hair was dishevelled and partly hanging down, and there was a bruise or bump on the right side of her head. He said life was extinct, but rigor mortis had not yet set in, and he could pry open her jaws and saw in her mouth and throat clots of blood. On the right side of her throat were four bruised and contused marks like as if they were made by fingernails, and one contusion on the left side that would lead one to think she was choked to death by a left-handed murderer. Two or three of the teeth were



missing from her upper right jaw, her face was livid and lips bluish and her tongue partly protruding. There were particles of food in her mouth mixed in with clots of blood, which would prove she was eating when it happened. A coffee pot was setting on the gas stove, with coffee in it, but the gas was turned off. On the bar or pipe that runs across the gas stove containing the stop cocks he found on the end a few strands of her hair. The fingernails of her left hand were cracked and bent outwards like as if she scratched wildly at her assailant. The thumb and two fingers of her right hand were bloody. There was a bottle of milk on the table partly used and one full bottle setting on the window sill, which proved the milkman had already made his rounds. There was a French roll on her plate, showing how she was biting it when attacked. The blood on the floor must have come from her mouth, since the contusion on her head did not bleed.

The neighbors said she was a quiet sort of woman, and was only married a few months, and she and her husband seemed devoted to each other and kept very much to themselves, and while they spoke pleasantly to the neighbors they never visited, and they did not know much about them. Doctor X. said he inquired about her health and they said she always looked the "picture of health." He said what led him to ask was he was wondering what made so much blood well up into her mouth and spatter

around on the floor. Being choked by a powerful murderer would impede the flow of blood even if the capillaries in the throat were ruptured during the act. He said the motive of this murder could not have been robbery because in the next room, which was the dining room, lay a purse with two ten dollar bills in it, and some silver sixty-five cents. This was lying on a buffet in full view of anyone who entered the room. The murdered woman had a sort of morning gown or kimono on and her neck was exposed, making it an easy matter to see the marks. Her eyes were glassy in death and bulged, giving all the evidence of her struggle for air.

By this time a thin, goiterous looking woman, whom Doctor X. had not seen before, edged in and said she knew something, but her rambling talk was so incoherent that he didn't pay much attention to her, but he heard her say something about hearing a wagon just before the scream and noises, that she thought was the milk wagon; she said she knew the milkman, and this lady had some quarrel or difficulty about the milk bill. But Doctor X. said he could see no motive in that for such a grewsome revenge. Then Doctor X. was prompted by instinct to follow up some clue he had on his mind after he first observed this horrible sight, and he went over her again before the muscles became rigid, and by tactile exploration felt "something" that later proved he was correct in his reasoning, and about

the time he finished this second exploration the coroner arrived with three detectives, and he said he was astonished at the manner in which the women of the neighborhood collected around the detectives and at the variety of stories which they told them. He said each detective had a group of five or six women about him and they were all talking at once, they knew all about it, and were talking for publication, because Doctor X. discovered there was a reporter in the crowd.

The patrolman on the beat was not to be seen because it occurred at the time when he was changing shifts, which by the way is a very opportune time for a hardened criminal to carry on his nefarious business, and Doctor X. said he often wondered why "the powers that be" never found a plan to keep the patrol on some way until the relief patrol arrived.

Shortly after the arrival of the coroner, the poor husband came running in wild and his pathetic condition would wring the hearts of the hardest. The poor fellow fell on the floor bemoaning his loss, and became smeared and stained with the life's blood of his wife. Doctor X. said he had to turn away, although he was trained in sorrow and consolation, he said he couldn't stand this man's pathetic condition. But it was not so with the coroner and the "bulls." They pried him with questions, even when he was in the midst of it, but maybe they were to



be excused in their anxiety to get a clue to work on and ferret out the murderer. The husband appeared to be a handsome fellow, about twenty-eight years of age, and he told them, after he became quiet and left the kitchen and went into the dining room, that he didn't know of any enemy that would stoop to such a crime. He said he was of Irish descent, but was born in America, and his wife was an American too, but of German descent. She was twenty-four years old, and once in awhile he would try to tell something but would break down and say, "Oh, no! Oh, no! It couldn't be! It couldn't be!" And then he would cry. Doctor X. said the detectives kept at him trying to find out what he meant by that, asking "What couldn't be?" So finally the husband said that he was afraid to tell them, because he may be wrong, and he would exclaim again, "Oh, no, it couldn't be!" The detectives treated him soothingly and gentlemanly, and he quieted down and told them the following story, which to their mind gave them a clue, and set them on the trail of the murderer.

The husband said, "For a year before I met my wife she was keeping company with a Brazilian, who came to this city about two years before. My wife seemed to like him, but she said he told so many stories to her about his business, which she found later were not so, that she tried hard to break off with him, but he was so infatuated with her that



he persisted in his attentions and made her life miserable up to the time I met her, and even then he intruded himself on her one night while I was with her, and we had some words and he went away making some threats, but his threats were against me. This was the last I saw of him, although he has been living on the south side all the time." The detectives seemed to nonchalantly dismiss the affair then, and the coroner took the body to the morgue where the coroner's physicians performed an autopsy and after a day or so the verdict came to the newspapers "That the woman was murdered by being hit on the head with a blunt weapon and then throttled to death by some person unknown."

Doctor X. said he became acquainted with the husband and made it his business to find out all he could about his wife, although he hated to bring up the subject, as he knew the fellow's great bereavement, but he found many things that dovetailed with his reasoning and deductions made the morning of the murder. So he was startled one morning when he picked up the newspaper, to see in big black typed headlines that the murderer was captured. He read on to find out how they caught one Lazado Sampaio, a Brazilian, somewhere on the outskirts of the city, and everything pointed to this man, from what the detectives found, as the murderer of Mrs. —, and that the husband identified him as the former lover of his wife, etc., etc., and that Lazado Sampaio

would appear in court to plead guilty or not guilty next morning. Doctor X. said he made it his business to go to the Municipal Court the next morning out of curiosity to see this fellow, and he said the fellow surely looked guilty by his nervous action, and he had the earmarks of a scuffle of some kind a few days before, because his face was somewhat contused, although it was full of pimples and might only have appeared so.

His old habit of lying stood against him in court too, because he told contradicting stories, and Doctor X. said there is an old adage which says, "He that lies hath need to have a good memory." This Brazilian was a big, swarthy, powerful fellow with two rows of white teeth, and a pimply but not unpleasant face. Doctor X. said everything was against him, so they held him for trial of murder in the first degree.

When the case came up for trial the newspapers made the most of it and added all the tragic sensational frills that appeal to the morbidity of the public, and the court room was packed, chiefly with women, every day hours before the case opened. Doctor X. said he was intensely interested in it himself because of the fact of his anxiety about the outcome. He said the first day when Sampaio was brought into court he could see or feel a wave of prejudice and animosity spread over the audience,

including the jurors. Of course, considering the heinous crime for which he was charged, the doctor didn't wonder much at the public feeling.

The prisoner was guarded well against any attempts at lynching because many rumors reached the authorities that such an attempt would be made. After all was ready and jury selected, the prosecuting attorney for the state called as first witnesses the coroner and his physicians, and each one told briefly and concisely how they found that the woman was murdered, probably by being struck first on the head by some blunt instrument, because on the right side of the head they saw a bruised or contused wound, and then she was choked to death after being knocked unconscious. They said the victim must have fought or defended herself before she was knocked unconscious, because they found the nails of her left fingers broken like as if she scratched ferociously at her assailant. The marks on the neck left no doubt in their minds, and they were sure she was throttled to death.

The neighbors were called, one after the other, and each told of hearing the banging noises and of the terrible scream, in short, everything that was noted before in these pages was brought out by the witnesses. The detectives told how they captured the murderer Lazado Sampaio, and his denial of knowing anything about the affair, and also how



he resisted arrest, and of his denying that he knew the murdered woman, although he admitted later that he did know her, and what with having scratches on his face, which he claimed was caused by a fight which he had with a Greek during a quarrel they had in a south side coffee house, and what with his being a gambler, although posing as representing some South American Coffee Company, but was unable to show any credentials, and what with his nervous actions when being confronted with the charge, all this Doctor X. said, and more too, stamped him as the murderer. But the climax of damning and convincing circumstantial evidence was reached when the detectives discovered that Lazado Sampaio was left-handed.

The coroner's physicians were of the opinion too that the woman was choked to death by a left-handed assailant. After the state rested its testimony, the defendant's attorney inadvertently put Sampaio on the stand, after all the other character witnesses had testified. His incoherence and nervous denials of everything helped to convince the jury that he was an arch fiend and liar, especially when he was under cross-examination of the prosecuting attorney. He denied things that he admitted before, and he admitted things that he denied before; his eyes were shifty, and the whites of his eyes were exaggerated by the background of his dark, swarthy skin; his



black oily hair was sleek, and Indian-like grew low on his forehead; in short, he looked and acted the picture of guilt and the opinion was that if there were no other evidence, he would have convicted himself. So Lazado was doomed, and everybody knew it, especially the jury.

For some reason, Doctor X. said, the trial had gone on a few days before they discovered that there was another physician who saw the body besides the coroner's physicians. This was found by testimony of some neighbor on the witness stand. And the prosecuting attorney subpoenaed him. He knew eventually that he would be called by the defense, so he was glad to be called by the state during the rebuttal evidence. So after the defense had finished he was the first new witness called.

After the district attorney and the attorney for the defense waived the question of his qualifications, the lawyer for the state asked, "Were you called on the morning of July 16th to Mrs. — at — Street?" Doctor X. answered "Yes." The District Attorney's questions: "Who called you, Doctor?"

Answer: "I don't know."

Question: "How long do you think she was dead when you arrived?"

Answer: "I should judge about an hour."

Question: "Were you there before the coroner and detectives?"

Answer: "Yes."

Question: "What was the position of the body when you first observed it?"

Answer: "Lying on her back near the gas stove in the kitchen."

Question: "Did the kitchen look as if there was a struggle?"

Answer: "Yes, I think so."

Question: "What made you think so?"

Answer: "Well, the floor was spattered with blood between the gas stove and the door leading out from the kitchen to the back yard, a chair was upset near the table; in fact, the general appearance of the kitchen looked as if there was some kind of a struggle."

Question: "Did you notice any of the marks found by the coroner's physicians on the woman's neck?"

Answer: "Yes."

Question: "Now, Doctor, do you think those marks were made by fingers?"

Answer: "Yes, I do."

Question: "Was it possible, Doctor, for those to be made by anyone other than a left-handed person?"

Objections to this were made by the defendant's attorney.

Court: "Has Doctor X. qualified as an expert witness?"

District Attorney: "No, but we are willing, if

the court please, to have his opinion on conditions as he found them that morning, as he was the first physician to see the murdered woman."

Defendant's Attorney: "Your honor, we object to this question. Doctor X. is not qualified to answer."

Court: "Well, Doctor X. may qualify by answering it and file his expert witness fee against the state. Answer the question, Doctor."

Answer: "Yes, it was possible."

The prosecuting attorney jumped up and told the Court this answer should be stricken out of the records as it proved Doctor X. was not qualified as expert witness and he took exception to the Court allowing his filing expert fee. The defendant's attorney was on his feet insisting that the answer should stand and that the doctor was fully qualified. This caused a wave of laughter to spread over the audience which brought raps from the Court's gavel.

Court: "Go on with the case, the answer stands."

Question: "You heard the coroner's physicians state that the lady was murdered by a left-handed person. Now, Doctor, how is it you think, after seeing those marks, that it could be otherwise?"

Answer: "Well, I think if the woman was knocked unconscious, as the coroner's doctors said, then if she was throttled, as they said she was, it could have been done by her assailant standing at her head



and bending over grappling her throat with his right hand."

There was some excitement and murmurings in the audience following this answer, probably each one telling the other "he thought of that too." The defendant's attorney began to pick up in spirits and take more interest in the doctor's answers.

Question: "I'm glad you brought out that point, Doctor; I see you may be right. Now you feel that she was hit on the head first and throttled to death after by someone right- or left-handed, no matter which?"

Answer: "No, I don't say that I do."

Question: "What?"

Answer: "I said, I don't say that I do."

The district attorney, taking off his glasses and wiping them, turned his head and smiled, winking at the jury, then said in a pompous manner, "That's all!"

Doctor X. was reluctant to leave the witness stand as he had a great deal on his mind that he wanted to bring out in this case. He told me that on that July morning, before the coroner and detectives left, he threw out some hints to them, which were his observations made in a painstaking way, but "they knew their business" and paid very little attention to what the coroner, at least, might have profited by.

The defendant's attorney arose and asked for per-



mission to cross question, which the Court said was his right.

The defendant's attorney, with urbane suavity, asked Doctor X. to tell the Court and jury how he thought the unfortunate woman was murdered.

The prosecuting attorney was on his feet immediately with objections. He said he had other witnesses and this was rebuttal evidence, and Doctor X.'s answer would be immaterial, irrelevant, etc., etc.

Court: "Objections overruled, answer the question, doctor."

Answer: "I do not think this unfortunate woman was murdered."

Doctor X. said that words could not describe the surprised look even on the defendant's attorney's face, as well as those of the Court and jury and everyone within his view. He said Sampaio jumped up appealingly dragging his guard to whom he was shackled, and babbled off a pathetic speech to the Court in broken English, interspersed with many Portuguese and Spanish words. All that fright-like guilt disappeared from his countenance as he stood up with his massive handsome body holding the guard as though he was standing holding a child by the hand, and cried out: "O Judge, Honorable Judge! The doctor says true, the doctor says true, I wouldn't do it, I didn't do it, I couldn't do it, I loved the poor lady, and she loved me too, one time. I

bought her flowers, I bought her candy, Carissima mia! How I loved her! Por Dios! Por que Señor? Oh, God! Why would I do it, Judge? Pobrecita! The poor lady! The poor little lady, I loved so much, and I would marry her, she liked me! She loved me too! But I was a wild fellow and she didn't like my business, I play too much cards! I go with gamblers! I keep bad company! She found it out! She told me to come no more! I beg her to forgive! I promise get good job, I fall on my knees, I cry out Carissima mia! Carissima mia!" Doctor X. said by this time the tears were streaming down his dark cheeks, and he could see the change of feeling spread like a wave over the court room, and women and men in the audience who formerly bore him malice and looked at him with horror as the brutal murderer and hardened criminal, now looked at him pityingly and handkerchiefs became in evidence, and a woman here and there in the audience could be heard to sob.

Sampaio stood there in court, his big athletic form quivering with emotion. He raised his unshackled hand to wipe the tears away, and then looking around at the lawyers and Court and jury cried out in sonorous tones, "Por Dios, Señors! I swear I am innocent."

He was led back sobbing and shaking with emotion to the prisoner's bench.

The stillness that remained in Court following this pathetic eloquence was only broken by occasional

sniveling here and there from women in the audience. Finally the Court aroused the defendant's attorney with the command, "Go on with your cross-examination."

Question: "When did you first get the idea that this woman was not murdered, Doctor?"

Answer: "On the morning of July 16th."

Question: "What first led you to think there was no crime committed?"

Answer: "So much blood."

Question: "So much blood?"

Answer: "Yes."

Question: "How would that make one think there was no crime?"

Answer: "Well, on first thought a physician would think of a hemorrhage from the lungs or stomach when he couldn't see an external wound that would cause so much blood."

Question: "How do you account for the wound on the woman's head?"

Answer: "When she fell in the last throes of her struggle she struck her head against the end of the pipe which runs across the gas stove."

Question: "How did you know that, Doctor?"

Answer: "From the position in which she was lying and the abrasion on her head, and this" (Doctor X. taking an envelope from his pocket from which he took a small tuft of hair), "which proves to be the unfortunate woman's hair and small shreds



of her scalp, I found on the end of the gas pipe."

After some discussion the lawyers agreed on the admission of the evidence and the defendant's attorney continued the cross-examination of Doctor X.

Question: "A witness stated she heard footsteps just before the peculiar 'gurgling scream' and banging noises. Wouldn't that lead you to think, Doctor, that some one committed the crime?"

Answer: "Not necessarily."

Question: "Why?"

Answer: "The footsteps were probably the milkman going out to his wagon, after delivering the milk. The witness stated it was before the scream, and that she heard a wagon; the milkman probably drove off and never heard the noises."

Question: "Doctor, to come back to the marks on the woman's neck, would that not signify violence from an assailant?"

Here the prosecuting attorney addressed the Court: "Your Honor, I object to the circumlocutionary manner in which the defendant's attorney is carrying on this cross-examination."

The defendant's attorney was on his feet saying, "If it pleases the Court, I want to bring out the details of the evidence for the benefit of the jury. From what we have seen here so far it proves that Doctor X. has made startling observations which should have been made by others before my client was arrested for a murder he never committed."



Court: "Suppose you would make a brief hypothetical question that would take in all the evidence not already reached. That would probably facilitate matters."

After some bickerings and dickerings between the lawyers for the defendant and those of the prosecution, they finally agreed.

Hypothetical Question: "Admitting a case where a woman is found dead, while her husband is absent, she being alone in the house at an early hour, and marks of violence found on head and neck, blood spattered on the floor and witnesses found who heard noises and a peculiar gurgling scream and hurrying footsteps, and the back door unlocked, would it not lead a physician to believe the woman was murdered?"

Answer: "I'll have to answer that by saying yes, providing the physician found no other evidence which would prove she was not murdered. Such evidence I have found and if the Court is willing I will give it in detail."

Court: "Go ahead, Doctor."

Doctor X.: "After first observing this grewsome sight I formed in my mind the theory of death from hemorrhage of the lungs; but on seeing marks on the neck I made a close study of them and found that they were made by the woman herself pushing up frantically with her fingernails towards her chin in a wild attempt to get something out of her larynx.

Then I noticed what a frantic effort she had made by seeing the fingernails of her left hand broken and bent outwards. The other hand was used in an effort to reach the object that was strangling her and also probably in an attempt to make herself vomit. The blood on the thumb and first two fingers would indicate this. On studying a gap in her upper right jaw I saw where a small crown bridge of probably two teeth was recently broken away. Then I noticed on her plate on the table a French roll into which she was biting, and I have this with me (Doctor X. removed from his pocket a small black box and withdrew a biscuit that was stale and dried from time.) And, if you notice, when this unfortunate lady bit into it, the crescent form of her bite shows the teeth were all intact and none missing. Now, I'll break off this fragment or bite that she never finished, and here you see a hard sharp piece of an oyster shell that somehow or another was baked in the biscuit. When her teeth struck this the small bridge broke and the gasp or sudden inspiration she underwent from the pain drew the object back and it slipped down under her epiglottis into the larynx. Then her struggle to dislodge it began. It cut the vessels of the throat and the blood welled up into her mouth and her attempts by tearing at her throat only made matters worse. There was only one 'gurgling scream' heard. This was when she saw her predicament. She probably tried to scream

many times but wasn't heard as the vocal chords were out of commission. Then she banged the kitchen door in her frantic attempts to call help, but became too weak to run out or keep up the noise, and in her struggle back and forth in the room, spitting blood, she eventually fell near the gas stove, striking her head on the pipe, and died of asphyxia. On palpating the larynx before rigor mortis set in, the muscles were soft, and I was enabled to confirm those deductions by feeling a hard object in the larynx. This the coroner's physicians probably couldn't do as she was rigid when they observed her, but if the body is exhumed this object will be found."

Following this sensational testimony the Court adjourned after ordering the body exhumed, which was done next day, and on opening the larynx the coroner's physician, in the presence of Doctor X. and the jury, found below the epiglottis a small bridge containing a gold crown and small artificial tooth.



## CHAPTER XVIII

### "HICCUPS"—"TWO LIVES SAVED"

WE were chatting about the way physicians met in their clubs and medical societies one night and discussed papers and medical topics, and the benefits that could be derived if only the medical men would attend meetings of their county medical societies more than they do.

Doctor X. told me that night after night at the meetings of their county medical society he sees the same crowd of twenty to thirty men while they have in good standing as many as five hundred members. This should not be, as there are many things in a scientific way brought out at those meetings that might redound beneficially to the patients of the great body of medical men who are conspicuous by their absence.

He said there are a number of physicians who are so "obsessed" with their own knowledge that they not only refuse to attend medical meetings, but wherever they can get out of it refuse to call in consultation men who many times might save the lives of their patients by suggesting some change in their



treatment. Doctor X. said if those fellows would only mix, and get better acquainted with their colleagues, they would find that the other fellow is not so bad after all, and most frequently it is the man we do not know who is the man we do not like. Therefore, by comingling with our colleagues we may learn a great deal and lose some of our own "exaggerated ego."

Then Doctor X. told me how two lives were saved by the suggestion of a consultant that he called in one day to help him with a patient who was dying with "hiccups." He said he was called to a big healthy looking fellow who gave a history of having the hiccups for four days before he consulted or called him. Of course the patient himself tried everything that the neighbors told him, from "tickling his soft palate with a rabbit's foot" to "standing on his head with his fingers in his ears," but it was of no use, he was fast loosing his healthy appearance and jerking his life away. Doctor X. found that his trouble started after taking two or three glasses of cold beer, but of course he wasn't sure but that it might be a coincidence as the man often took beer before and didn't get hiccups. So he said he prescribed antispasmodics and sedatives but the next day the man was as bad as ever. He said before the fellow got his hiccups he was of two hundred pound weight, but judged that in the four days he lost twenty-five pounds. The next day he called

early and found that while he had some sleep from his sedatives he hiccuped in his sleep, and was fast losing out. Doctor X. said he resorted to stronger sedatives and antispasmodics, but of no use. He went back to his office and went over the medical literature and found some suggestions on the treatment of hiccups and then went back to his patient and tried them, but could only get temporary relief. Then he resorted to cathartics and purgatives and the hiccups persisted and the man was getting weaker and weaker. Then he called up some of his colleagues, and they gave him some suggestions, but still the poor fellow kept jerking away without any signs of let-up. Then he tried enemas; then he tried effervescent drinks, to create pressure on the diaphragm; then he tried pressing down with his fist on the epigastrium, but of no use, the poor fellow kept it up, and he noticed that his heart was getting very slow, beating only forty or fifty per minute, showing that something toxic was causing the hiccups as well as irritating the inhibitory fibers of the vagus nerve, thereby causing a slow beat of the heart. In short, Doctor X. tried everything he could find, and the family was getting alarmed as he was now in his eighth day of the hiccups, so Doctor X. called a prominent consultant and after stating the case as he knew it, the consultant asked him if he tried "atropin"? And he said he was dumfounded to think he had been such a "blockhead" because of all

the remedies that should have been used, this was the one that was indicated from the symptoms that were as plain as the nose on his face. The slow pulse alone might have shown him that the same toxemia that was irritating the vagus nerve was irritating the phrenic nerve and causing the spasms of the diaphragm. But he had to admit he never thought of that. So Doctor X. said he took out his hypodermic syringe, but in fear and trembling, he was afraid he was too late, as the man appeared to be dying. Then he injected 1-25 grain of atropin and the hiccups stopped in less than five minutes. Then he stayed there with his patient, giving light nourishment all night with stimulants, and the hiccups never returned, and he nursed the poor fellow back to health again, and after three or four days he was up and in a week he was strong enough to return to his work again.

I said to Doctor X. that he said there were "two lives saved." "Who was the other?" He told me that the other was a physican down in Tennessee whose case was exactly the same as the one described, except that the doctor in Tennessee didn't have the history of drinking cold beer.

Then I asked, "How the hell could he save a doctor's life away down in Tennessee?" He told me that whenever a medical man finds out something that will save life, it is his duty, or should be his duty, to publish it for the benefit of all the other physicians



in the world, and that he knew of no other medium, or better way to get it to all the physicians in the world than by publishing the report of the case in the *Journal of the American Medical Association*. And this he did, and by a strange and lucky coincidence the *Journal* reached the hospital where the doctor was dying just in the nick of time, and his physicians, seeing the article described a case just like they had on their hands, took advantage of it just as he did of the suggestion of his consultant, and injected the atropin and saved the doctor's life.

Then Doctor X. said, "I wonder if the doctor down in Tennessee would have any objections to my showing or publishing his letter of thanks to me for publishing my article which he claims saved his life." I told him I thought he would be glad to if it would do any good. And after some persuasion Doctor X. gave me, reluctantly, the following letter.

"C——, Tenn., 6-25-13.

"Dear Doctor X.:

"Every physician, I suppose, is more or less pleased when he learns that the publication of his experience has been helpful to some coworker. The report of your case of 'Persistent Hiccups' was published at a most opportune time for the relief of the most distressing affection in my own person. My own condition resembled that of your patient to such an extent that possibly a detailed description on my



part would be pardonable, although my physician said he would report my case to you and furnish the record. However, I did not come under his care until after the hiccups had persisted for six days. On June 12th, after suffering with a burning pain in the epigastric region, all the forenoon, and after eating a rather hearty dinner (for it did not interfere with my appetite) a rather violent attack of hiccups came on about one o'clock and was only relieved by emptying my stomach. I immediately concluded that some irritant was at the bottom of my trouble, and proceeded to take Epsom salts in repeated doses. To my surprise the hiccups returned later in the day, and a good sized dose of calomel was taken. On Friday the condition persisted more or less, although I endeavored to disregard it, considering the affection a trivial affair. Friday night brought no especial relief, although I had begun to take some of the milder antispasmodics. On Saturday morning I ran down to C——, some eight miles distant, where it was necessary to meet an engagement, and it seemed that the hiccups were trying to keep pace with the exhaust of my motor. By this time my trouble began to attract attention and numerous remedies were recommended by my colleagues. For the next three days the usual remedies for hiccups were tried, without avail, that is, only temporary relief was obtained. Carbonated ice water would give me relief for about two hours,

hypodermics of morphine and the inhalation of chloroform to complete anæsthesia would give me only temporary relief. On Wednesday morning, after a turbulent night, I decided to take my chances in a nearby hospital. On entering the hospital a physician was called. He recommended an ice bag to the epigastrium and ten grains of chloral every two hours. I was disgusted for the hiccups were rapidly jerking the life out of me, and I had already taken chloral 'ad nauseam.' However, the treatment was accepted and accordingly begun. The ice bag was helpful for it was kept up continuously until the following Saturday night. On Wednesday afternoon the hiccups were still persisting, and my medical friends had begun to search the latest literature. Your article was found simultaneously by several, and after a hasty consultation the atropin was begun. Marked relief from pain was experienced from the first dose, though it was only after four doses of between 1-30 and 1-100 of a grain was given that permanent relief was obtained. No other treatment was given me after the atropin was begun, except the application of the ice bag. My *A. M. A. Journal* reached me on Monday before going to the hospital, and had I felt like looking over its contents, much suffering might have been avoided. Or again, had I remained in bed at home, as I did after leaving home, relief might have been obtained. At any rate, I feel grateful to you for the report of your case,

and trust it may be as helpful to others similarly afflicted as it has been to me. I remain, with all good wishes,

"Yours fraternally,

"R. S. P——, M. D."



## CHAPTER XIX

### "CHILDREN THAT MIGHT HAVE BEEN"—"GET THE DOCTOR"

SOMEHOW or other we got on the subject of race-suicide one evening, and I asked Doctor X. what has gotten into the women nowadays that you rarely see the large families that our good old mothers used to raise in days gone by.

He told me that he marvelled at the large number of children that some of the good mothers in poorer districts have. He said when he is making calls on patients in this region he has to be always on the lookout for fear he will run over some of their kiddies, who use the middle of the street for their playground. If it wasn't for this class our country would be depopulated. Then he compared one of those streets with one of the boulevards where there were large brownstone mansions and beautiful lawns, which would be an ideal place to raise children but what have we, nothing but solitude and architecture, never the remotest sound of a child's happy voice. The inhabitants of those mansions spend too much time running back and forth to Europe and

their social duties are more important to them than taking the responsibility of raising children. So block after block on the boulevards you will not hear the sound of a child's voice, while in one block of the poorer district of a summer's evening you will find swarms of children running into the thousands. Doctor X. said he regretted the condition of affairs that have arisen in recent years, which is causing the middle class or bourgeoisie to enter into the barren field of race suicide. But this is not due to the same reasons as the other class, but to housing conditions which have become critical these late years. Some owners of apartment buildings will taboo a good honest mother with a child in her arms, but readily admit an "insipid female of the species" with a sore-eyed, long-haired white poodle in her arms. Then, if they are in the modern apartment of one or two rooms and a kitchenette and the stork happens to come, they have to move out.

Doctor X. told me that any man and wife who, for economic, social, "apartment" or other reasons in their early life, play the morbid game of "race suicide," will suffer nature's penalties tenfold in later years. There will come many cravings for the patter of the little child's feet to both husband and wife, but to them it will be nothing but "the footsteps on Soho's corner," because then to them there will be only ghostly memories of children "that might have been," but now when they want them the nervous

wrecks they have made of themselves have become barren wastes.

Doctor X. told me that it is absolutely impossible to transgress the laws of nature without paying heavy penalties later on in life.

And while we were on this subject he said that only recently he knew of a prominent lady whose social and selfish duties kept her from bearing children, and when she began to crave for a child and was becoming estranged from her husband who had always craved for children, she attempted to bring her husband back to her by a scheming diabolical trick and in her planning and attempt at "putting it over" dragged a respected and prominent physician innocently over the precipice down deep into a pitfall which eventually landed him in the courts, which sure is hell. Doctor X. saw that this subject made me sit up, and went on to tell how all this happened.

You know, he said, I often wonder why the father and mother of young girls between sixteen and eighteen or twenty years of age out in the farming districts and villages of the state, leave them come to the city with all its temptations, to live and work around in the different stores and restaurants. While they are good innocent girls when they first come, they are sure to be caught in the maelstrom of city life, and in their tender years, without proper protection, naturally drift in the direction of least resistance. If you can show me a man with a brain



so sodden and dead as this "man with the hoe," this farmer or villager who lets his little girlie leave her home and mother's care and come alone into the whirlpool of vice in the city, eventually meeting with some of the cabaret lizards and "men about the town" who have no more respect for the virtue of a young girl than a hellhound for holy water, then I would be tempted to say, like the rube at the circus, when he saw a giraffe: "They ain't no sech animal." But, alas, there are many. And this father whom the doctor had in mind, when he started out with his story, allowed his little girl, sixteen years old, to come into the city and room around in boarding houses, while working in a restaurant. She of course met some rascal, and her life became the old, old story, ruined.

About the time she was about to become a mother, this prominent lady, aforesaid mentioned, came to her rescue, and if the authorities had never discovered the hoax it would not be so diabolical after all, and would have been a good thing all around. But, as these chapters have to do with pitfalls of the medical profession, the doctor at least will consider it a diabolical trick.

Doctor X. said the lady got the unfortunate girl into a maternity hospital and an illegitimate child was born, and accordingly reported to the health authorities by the hospital doctors. The prominent lady, having everything prearranged with the girl,



took the child away to her home. She had been writing to her husband, who was away in another town, telling him he would soon become a father, and the man of course, while doubting at first, still he knew he wasn't entirely estranged from her, and many times had visited home, began to think, well, at last! at last! So he did as all proud fathers do, threw out his chest and put his thumbs in the arm-holes of his vest and strutted back and forth across the floor like the "chanticleer" he thought himself to be. The lady, after arriving home with the baby she "borrowed for keeps" went to bed and rolled the baby up 'in swaddling clothes and tucked it inside under the covers, snuggled up close to her. Then she had some one telephone for a doctor and tell him to "hurry" and cried out, "Oh, oh, get the doctor and tell him to hurry!" This of course was for the benefit of the neighbors, and other "doubting Thomases" that may be within hearing. At three or four in the morning one can realize how sounds of this kind can disturb sleep, and everybody knew there was something doing. So the doctor arrived posthaste, but by this time the sounds had died down and when he entered the room could hear only the "musical" sound of the baby. The pseudo-madonna lay there with that heavenly expression which doctors see on their faces when they complete such ardent task and said, "Too late, Doctor! Oh, why didn't you hurry?" Of course the doctor said

he did hurry as fast as he could. She said, "Well, I am sorry, but you must look after the report of my baby. Of course, I'll pay you just as though you were in time to attend me," so she paid the doctor, and he of course innocently made out a report of the baby.

Now, if the incident would have closed here, all would be well, they would all be happy, the husband would be happy, and probably have gone back to his wife and raised a fine child; the child would have been well taken care of and have a good home instead of it being an institutional child as it is at present. The girl could have hidden her shame where now her downfall is known to the public, the pseudo-mother would become attached to the baby and have her motherly cravings satisfied and her husband's affection restored. The parents of the girl in the country would not have to hang their heads in shame. But they deserved some punishment for letting their little girl come to the city. And, last but not least, the doctor would never have known that he was wallowing in the mire of a pitfall. But no, "tattling neighbors," "busy-bodies" managed some way to let the authorities in on the game, and the doctor was arrested for filing a false birth report, and they took the child away from its foster-mother.

## CHAPTER XX

### "TICKLED TO DEATH"

I ASKED Doctor X. one night how the chiropractors, according to their reports to newspapers, come to have a lower mortality during the epidemics of influenza and influenzal pneumonia than the doctors. I said, if he noticed they said they had only one per cent. of deaths where the doctors had thirty per cent.

Doctor X. told me that not only the chiropractors but all the other cults that have arisen these late years, could say the same thing and it would be true too, but who were the unfortunate victims that lay on their marble slabs, or "mauling tables," so long to be "tickled to death" to make up the one per cent?

Then he went on to tell how many people who really had the "flu" were kept coming to those men and women for treatments, when they should have been in bed. Then, after not having the proper care in bed, suddenly developed influenzal pneumonia and of course when they were too late called a doctor, and in many cases died of pneumonia, which might have been prevented had they been under proper



care from the first day of their illness. So you see that the mortality in those instances was passed on to the doctors. "Great Scott," Doctor X. said, "how could any one be fool enough to continue this back tickling business until he is dead?" They naturally should have no mortality. I saw he was right and thought to myself the cults only used that means to get themselves before the public, especially that class of the public who do not think—and I dare say there are a great many of them.

Doctor X. told me of some of the amusing methods these different "paths" have in working up business. They usually start by getting a list of chronics or neurotic people's addresses and like the mediums send out letters to the prospective dupes to come on certain evenings to a "free lecture" to be given at their offices. Then, on a chart they show how they can "cure" everything from "locomotor ataxia" to tic of the "levator labii superioris alæque nasi." After those lectures they talk up business. They are past masters at soliciting and advertising themselves, so you see it isn't long until they have them coming and a crowded office always, to the laity, is an indication of a good doctor. But to the medical mind it usually is an indication of a good bluffer. This is not only true of the osteopaths and chiropractors, but of the doctors; and Doctor X. told me that recently the American Medical Association sent out as a slogan and warning "Beware of the busy doc-

tor!" The reason was that the busy man cannot take time enough to give you a good thorough examination, he cannot give the time to the study of your case to detect disease in its incipency, and cure it while the curing is good. The "busy doctor," then, is the one who looks at your tongue, listens to your lungs through all your clothes including your overcoat, takes your pulse, makes a "snap diagnosis," writes a *R* and yells out "Next." Oh, I forgot, he takes his fee too, but he doesn't earn it.

To come back to the chiropractors and all the other "cults" and "paths," Doctor X. said: If you notice whenever a great calamity suddenly strikes the world, or any section of the world, that may bring about injury or sickness, all these "cults," "paths," and "sects" sneak into their holes and hide. Then the government and people turn to the legitimate physicians and surgeons to give succor to the sick and bind the wounds of the maimed and always find them willing and ready to respond to the most ardent duties where life and health are at stake.

Then, after the great calamity is over and peace is restored, and the public settled down to its usual life, this element comes sneaking back into the limelight again and in their "Pecksniffian" audacity tell the public that "they are the great benefactors and protectors of life and health." This makes one cry out like David of old, "How long, O Lord, how long?"

Then Doctor X. put it up to me this way: If you read in a newspaper some morning when you sat down to breakfast "A great plague or grave disease of some kind broke out down south and the government sent a thousand Christian Scientists down to read Mary Baker Glover Patterson Eddy's *Science and Health* to bring about a cure of the victims, and the government also sent a thousand osteo-chiro-vita-napropaths to adjust their spinal columns and dance a tattoo on their backs and give their nerves "impingement," and "pull their poisons" out through the soles of their feet and show the poisons on copper plates, and wriggle their ligaments and connective tissue, wouldn't you think our dear government had gone crazy? By Jove! I had to admit I would. Well, he said, that's just where the poor dupes have gone who place their lives in the hands of this same class of pseudo-scientists. Then he said, "Now if you read that the government sent a thousand surgeons and physicians and trained nurses to the scene of the plague or disaster, you would probably think that was the proper thing to do, would you not?"

Doctor X.'s reasoning was so sound that I stored it away for the benefit of some of my friends whom I knew liked to trifle with their health because they thought they felt better after having their backs tickled.

Doctor X. told me that only recently he saw an advertisement in a prominent newspaper in this city



where they were making a bid for the modest young maidens to come to them for treatment. He said this is on record in the files of the newspapers, and they cannot deny it. The advertisement ran something like this: "All young unmarried ladies, no matter how modest they may be, should have no hesitancy in consulting us for treatment, no matter what their ills may be. We are perfect gentlemen, and all that is necessary for the young lady to do is to wear a dress that opens up her back."

## CHAPTER XXI

### "QUICK WATSON"

WE were talking about commercialism in drugs one evening and my old pal, Doctor X., said he was surprised and astonished sometimes at some of the wholesale pharmaceutical houses for the manner in which they are so persistent in detailing physicians with samples of drugs and proprietary compounds, not even conforming with the rules or accepted by the Council of Pharmacy and Chemistry of the A. M. A.

He told me that some of those fellows who travel over the country visiting physicians with their different samples are physicians who have "fallen by the wayside," but they have medical nomenclature always at their command, and use their persuasive powers very often in persuading doctors to try out their different elixirs, vaccines and bacterins, polyvalent and otherwise, on their unsuspecting clientele, thereby prescribing worthless preparations, sometimes detrimental to the health and welfare of their patients.

The well-trained medical man nowadays pays lit-

the attention to this sample junk that is sent out with men who mean well and must earn their livelihood.

They stick more closely to the U. S. Pharmacopœia and National Formulary, as well as to what is accepted by the Council of Pharmacy of the A. M. A. published under the caption of "New and Non-Official Remedies" in the *Journal of the A. M. A.*

This council is composed of men of experience who are experts in testing out the pharmacodynamic and therapeutic value of all preparations submitted to them by the different drug houses and manufacturing chemists throughout the world; so when the council places its official stamp of approval on a preparation submitted to it the physician knows the drug has all the ingredients and value that is claimed for it.

Then Doctor X. told me a story of how one Doctor "B. Quick Watson" went headlong into a pitfall because of his enthusiasm fostered by drug agents, in using a certain proprietary preparation, said to be a filtrate of bacterial cultures which when injected into the patient was supposed to stimulate defensive anti-bodies, but which preparation was not endorsed by the Council of Pharmacy.

This big bluff doctor was one of the wildest enthusiasts in the city over the hypodermic and intravenous use of serums, vaccines and bacterins. He was one of those doctors that would "try anything



once," or oftener, if some detail man said it was good.

The extent of his medical literature was made up of pamphlets that pharmaceutical houses and their detail men gave him, and also an odd little peculiar doughnut quarterly that came regularly in his mail every three months.

Doctor X. predicted that some day he would make a *faux pas* and his Nemesis would loom up on the horizon with all her retributive vengeance; but, unfortunately, some poor confiding patient would have to pay the penalty because of his enthusiasm for this questionable method of treating all diseases.

So finally "the thing happened" in this manner: One day a beautiful young married lady limped into Doctor X.'s office to consult him in regard to her "rheumatism" of the hip and knee. She was one of those expressive types of women whose facial expression and poise reminded the doctor of "Mrs. Tom Duff."

After going over her carefully and taking her history he found that he could not get at the bottom of her trouble by physical examination, so he recommended that she should go to a hospital where she could have better care and he would have a better chance to study her condition, and with blood and X-Ray examinations possibly find the focus of her infection which caused the arthritis.

She took his advice and went to a hospital but the

X-Ray examination of her teeth proved negative, the blood picture was normal and Wassermann negative. Her heart and lungs were normal but her tonsils looked suspicious and Doctor X. had a throat specialist remove them, but his patient received no benefit from their removal.

After a time she seemed fairly comfortable from large doses of the salicylates but her rheumatism jumped from one joint to another until it went the rounds of all the joints of her body, and the poor woman suffered so much that she became very much discouraged and complained to her husband that Doctor X. was not doing her much good.

The husband called at his office to talk over her condition and in a gentlemanly way satisfactory to the doctor released him from the case and employed another.

After the change of doctors, the lady of course improved somewhat—patients usually do improve with a change of physicians, for a while at least, as they are usually optimistic with a change of treatment—but she relapsed back again after a few days as bad as ever, and run on in this way for a month or so and after the warm weather came, she became more comfortable and left the hospital, but the joints were stiff and sore although the infection never seemed to affect the heart.

So in this condition she did what most all sufferers do, start in the rounds of naprapaths and

chiropractors and all the other sects and fads, trying to obtain relief. But, their manipulating only made her worse because the real cause of her trouble was not found.

Finally one of Doctor "B. Quick Watson's" female boosters landed her in his office and he treated her hypodermically every other day with gradually increasing doses of a questionable drug in a normal salt solution and again from her optimism and confidence in the doctor she improved for awhile, but her pains never left her joints entirely and she showed no reaction following the hypodermic treatment.

So one day, he decided to give her a good-sized dose of the drug intravenously in a normal salt solution, so he sent her home so that if a reaction would occur she would be in bed and have proper care.

In the afternoon he called and gave her the intravenous injection after which she developed a frightful chill that lasted about a half hour, then her breathing became irregular, she became nauseated and cyanosed and was dead in about one hour following this intravenous injection.



## CHAPTER XXII

### "THOU SHALT NOT KILL"

ONLY recently the newspapers were making a big sensation about the question of whether or not physicians should destroy the life of a child in order to save the life of the mother. This sensation was brought about by five professors in a certain medical college resigning because they couldn't agree with, or subscribe to, the ethics of the University, with which the medical school is an integral part. I asked Doctor X. what his opinion on this question was and he told me that while he believed that the men who disagreed with the president were honest in their belief, that they had the right to kill the child in utero to save the mother, still he thought that the head of the University was right in asking their resignation if they couldn't subscribe to the ethics of the school, as it is morally wrong to destroy life under any circumstances with such exceptions as, first, in a just war, secondly, in legal capital punishment, and thirdly, in self-defense. Doctor X. told me according to the teaching in many schools the

physicians believe they are justified in performing abortion on women whom they think after competent consultation will die if the abortion is not done. But if those same physicians would stop to consider the moral side of the question, I mean the commandment that says, "Thou shalt not kill," they might conscientiously hesitate to destroy a life that in after years might be a hundredfold more important to the world than the mother ever would or could be. He said also that the real reason of course of physicians having this belief is because they think their first duty is to protect the life of their patient, but in this thought they forget that the unknown unborn child is their patient too. Then, again, the affection of the family for the mother enters into it, and unless the physician holds to the commandment he may be persuaded to destroy the child.

I asked Doctor X. would not the physician kill the mother by omission if he let her die in order to save the child. He told me that this is the question that naturally always comes up when this subject is discussed by medical men as well as the laity. In order to express his own opinion as to the answer of it he would say at the outset, there never should be any omission by physician or physicians in charge of the case.

That is, they should do all in their power to save the mother; at the same time they should always re-

member that the child has a right to live. The Commandment does not say: "Thou shalt kill the mother to save the child."

Save the mother wherever it is possible, but never kill the child, because that child has had no say in its creation, and is entitled to live some time on this mundane sphere, where the mother has lived a number of years at least up to the age of nubility.

You must remember one thing, he said, and leave out all sentiment and that is that the mother and the child are both human beings. Still, I felt that the poor mother had some right to this "Self-defense" he had spoken of. So I said: "Yes, but Doctor, what about the physician letting the mother die when killing the child might save her?" He looked at me with that sympathetic smile of his and I thought, now I had him; but instead of answering my question immediately he put it up to me this way: "But why pick on the poor doctor? Why through sentiment and love for one human being more than another, should you call in the doctor to commit your murders?"

Then he said: "If you noticed the last part of your question, which says, 'might save her'—how many crimes have been committed under that phrase 'might save her'?"

He told me that if all the physicians in the world made it a rule never to commit abortion—therapeutic or otherwise—many more mothers' lives would be



saved, because by this meddlesome interference with nature's laws by physicians who sometimes use poor judgment in the choice of operations, there are more mothers lost than are saved, and surely what is best for the greatest number of mothers is the best policy to pursue.

He told me the greatest medical minds are now leaning towards the policy that therapeutic abortion is never justifiable, because there are so many other ways to get around it that are less dangerous to both mother and child.

He told me that many mothers come to physicians pregnant, with a history of having convulsions—or "eclampsia" as he called it—in former pregnancies, but who came through the former pregnancies without disastrous results, although it is an extremely grave condition, but were afraid to take the chance again, so they ask to be aborted because some of their friends told them, even some physicians told them, they would die if they had another child. These women may show albumin in the urine and everything that may indicate that they would have convulsions again, but who can say positively that they will, or that they will die either, even though they are in more danger than a woman who goes through normal gestation? And the meddlesome doctor or doctors who may attempt to bring about abortion in those women may precipitate the convulsions and kill both woman and child in the act of trying to

save the mother, when if he let her go on as she did before she may come through the second ordeal even in a normal manner, with the assistance of a physician of good sound judgment in his treatment all through her months of gestation. Then, again, take for instance a woman who becomes pregnant and it is discovered that her pelvis is so contracted that it is absolutely impossible for her to give birth to an infant at full term, do you think the doctor is justified in performing an abortion on her? I said, if she were my wife I fear I would request it. Doctor X. told me then I would be party to the crime of murder.

Then he said that the technique of aseptic surgery was so improved the last quarter of a century, that by letting a woman with a contracted or deformed pelvis go on in her gestation to full term and then delivering the child by Cesarian section that the mother would be in less danger of dying than she would if an abortion was performed in the early months of her pregnancy.

Then he told me of an instance where a lady who was married some two or three years ago and who had a deformed pelvis that would appear to a physician by measurement that it would be impossible for her to have a child through the normal channel. Her husband called into consultation, when she became pregnant, prominent physicians, and they all thought on account of not only the deformed pelvis

but the fact of her having a dislocated hip joint that made her frightfully lame, an abortion was indicated and advised. The lady herself stood out against it, much to her credit and welfare after. Doctor X. said this lady carried her baby to full term and while her labor was hard she came through it normally, even without instruments, and now has a beautiful little girl whom the prominent doctors were willing to kill. Even the Cesarian section was not necessary, although Doctor X. said he thought it would be, and had her in a hospital at the time of labor and everything ready for the operation if it became necessary.

The child is a normal healthy child and not only that, but the mother is not nearly as lame as she was before the birth of her child because the spreading of the pelvis at the time of labor seems to have set the hip joint at a more proper angle to the pelvis and thereby making walking less troublesome.

Then Doctor X. told me of another lady who had tuberculosis who became pregnant and her physician, who specialized in tuberculosis, sent her to him, to see if he would abort her because it is known that sometimes pregnancy lights up the condition and the mother is in danger. This woman not only had tuberculosis but showed albumin in her urine. Doctor X. said he told her that carrying her baby may do her less damage than having some doctor produce an abortion on her that in itself may light up her



disease quicker and not only that, but she needed good care and advice all through her pregnancy and by that and rest she may come out better than if she would submit to such horrible operation, which some men have no scruples about performing. Anyway, with the proper care this woman went through her gestation to full term and had a fine healthy baby without any trouble either from convulsions or the lighting up of her tuberculosis any worse than before, and both she and her husband are happy in the possession of the child, and many times thanked Doctor X. for his advice and care.

Doctor X. told me he was surprised and astonished at the number of people who think so lightly of destroying the life of an unborn child. He said when he first started in the practice of medicine he became so worked up and indignant at the request of some women who called with such criminal instinct that he used to lose his temper and "bawl" them out for it, but he found that by changing his tactics he many times persuaded, especially unfortunate girls, not to have it done, where otherwise they used to leave his office and go to some criminal doctor who would do it for the coin that was in it. He told me, how he rubbed it in good one day when a married woman came and told him brazenly that she had a little child two years old and she was pregnant again and didn't want any more children, one was enough. And would he perform an abortion on her? Doctor X.

said to her, "My good (?) lady, you are foolish to take such a risk. Why not carry this child through and if you only want one child, bring the other one you have at home here and have it murdered." She fired up immediately and said, "Oh, Lord, you brute! You would not want to murder my baby, would you?" Doctor X. said he looked at her and said, "You 'criminal hyena,' you 'female of the species,' isn't that just what you asked me to do with your other child? What's the difference whether you murder the child within your body or the one you have at home?" He said, "Isn't it murder either way?" The woman sat down from the excitement and from a faint condition broke out into a hysterical state for awhile and then quieted down and said she was sorry, that at last she saw she was wrong, but no other doctor ever put it in that light before to her. She cried bitterly for fifteen minutes, and then got up and thanked him for opening her eyes and setting her thinking right.

This lady carried the child through and now has six in all, and has not only gained the respect of Doctor X. but is respected by every one who knows her.

Then Doctor X. put it up to me in this manner: What would the world have lost if this class of physicians were in attendance on the mothers of such men as Edison, Marconi, Osler, Pasteur, Alexander Pope, George Washington, Lincoln, Burbank, Roent-

gen, Ehrlich, Gorgas, von Behring, Lister, Jenner, Dickens, Shakespeare, Leo XIII, Currie, Morton, Bell, and hosts of others, too numerous to mention, providing the same question should have arisen in their prenatal state?



## CHAPTER XXIII

### "BURIED ALIVE"—"ORIENTAL ORGIES"

I WAS reading an article one day in the newspaper describing how a woman came near being buried alive, somewhere up in Minnesota, and how she was declared dead by two physicians and was laid out in her coffin by an undertaker, and the night before the funeral the watchers were scared to death by the woman sitting up in her coffin and crying out: "Where am I?" "What's the matter?" "Am I dreaming?" "I was sound asleep"; and how the watchers scuttled out of the house and ran for their lives thinking it was the woman's ghost, etc., etc. And my poor wife, who was listening—for I was reading out loud—said: "Could that be true? My, oh, my, I would have been frightened too!"

I told her that Doctor X. said many times that such stories were usually concocted by reporters when news was scarce and they wanted something to start the people talking about what they saw in the newspapers. "But," my wife said, "how can they put the name and address in the paper like that if it isn't true?" "Well," I said, "they probably in-

vented the name and address too." I clipped the article out of the newspaper, and, after carrying it around in my pocket a week or two, thought of showing it to Doctor X. He often told me that it is absolutely impossible for any one to be buried alive, even if the doctors declare the patient dead when he is not, because of the method of embalming nowadays.

One night we were together and somehow I happened to take some letters out of my pocket and the clipping fell on the floor. So I handed it to the doctor, and after he read it he searched his files and found a letter from the postmaster of the little town in Minnesota, which he handed to me. It read as follows:

"M——, Minnesota, July 26, —.

"Doctor X.:

"I received your letter regarding the affair of Miss ——, who was supposed to have died and was laid out and come to life again, as described in the newspaper clipping you sent. Well, all I can say is that I don't know of any one by that name in this little burg. I guess some 'nut' started the story, because if it happened in this town I would know it, 'cause I know everything that goes on here, being the postmaster.

"Yours truly,

"John Doe, Postmaster."

Then Doctor X. told me that for the last ten years he had been watching for this type of "news," which appears from time to time in the newspapers, and where they mentioned the town he usually wrote to the postmaster or the mayor, and always received a reply that coincided with the letter written above. He told me he often wondered why the papers persisted in that one classical lie, telling the people how "some one was declared dead by physicians and was about to be buried when he or she kicked the lid off the coffin and sat up and scared the mourners." He told me he thought it was because so many people believe everything they see in print, and that starts them talking about the particular newspaper in which they see the article.

Then he told me of a story of a similar type that was true but it never got into the newspapers, and probably it was a good thing too, because a prominent physician in this city would have had his good reputation blasted by it if it did get into the papers. He said one night he was called to a Chinaman, who worked in a chop suey restaurant for another prominent Chinaman. This "Chink" to whom he was called had gotten hold of a few jars of confection of opium and had eaten the contents. They had sent for the physician, when they found him lying apparently dead on the floor in the back room of the restaurant, with both his hands and fingers smeared with the confection, also his lips and face—like a



kid who had gotten at a jar of jam. When this prominent doctor arrived he found that the Chinaman's respiration had ceased and his pulse was imperceptible, so he came to the conclusion that he was dead, after he made a cursory examination; also, too, because a number of Chinks told him he was too late, the "Chink eattee too much dopee." So, as I say, this prominent physician declared him dead, and he sent for the coroner. While they were waiting for the coroner to arrive, the "Chinks" were holding some kind of an Oriental orgy over him, and one of them noticed he took one deep breath, so they sent a hurry call for Doctor X. He said when he arrived he could see his respiration had ceased and his pulse could not be felt at the wrist, and on stripping his clothing down he placed his stethoscope over the heart, and for a time could not tell whether he heard his own heart or the "Chink's" heart, he had hurried so fast to the place. So he said he took out his hypodermic and injected atropin and strychnia into his arms and then placed the stethoscope again over the heart and waited awhile until he proved that the Chinaman still had a faint heart beat. Then he started in forcing an artificial respiration. He made them open all the windows, and, with the assistance of the other Chinamen, he raised and lowered the "Chink's" arms, imitating the normal respiration, and keeping it up continually, occasionally injecting atropin, while the other Chinamen assisted

in keeping up the respiration. This Doctor X. continued for hours, also washing out his stomach with a stomach pump, when he first heard the faint beat of his heart. This, with the injection of atropin, strychnin and digitalin, also a solution of potassium permanganate under the skin, stimulated the poor fellow to such an extent that Doctor X. began to feel a perceptible pulse at the wrist, and with injection of normal salt solution and stimulants and artificial respiration kept up from seven P. M. to one A. M., the "Chink" began to show signs of life and started in breathing of his own accord, and then Doctor X. began a system of pinching him over the kidneys, which started him rolling from side to side and swearing in Chinese language. This, and slapping him in the face with wet towels, and raising him on his feet and using every possible effort to keep him going, finally aroused him, and he started blabbering in his own language to his friends. Doctor X. said he stayed all night with a crowd of Chinamen, keeping this "Chink" awake by injections and pouring strong black coffee into him, and finally, after a cold bath in the morning, he was thoroughly aroused and never lapsed back into the deep coma which happened so many times during the night.

This "Chink" can be found now in perfect health in the same chop suey restaurant, serving the public, but the lesson he got from this experience cured him of the habit of eating the confection of opium,

and the prominent physician, who declared the "Chink" dead, is still enjoying a lucrative practice in this city, and Doctor X. said he realizes how near he was to being precipitated into oblivion if the newspapers had gotten hold of the story of how he declared the Chinaman dead and sent for the Coroner.



## CHAPTER XXIV

### "SILENCE IS GOLDEN"

I WAS sitting in Doctor X.'s study one evening, waiting for him to return from a call he received some time before I had arrived. I knew when he came back he would be glad to see me, as he had a habit of sitting up late smoking and chatting about the many happenings of the day. I, also, never could sleep if I went to bed early, so I enjoyed nothing better than his company. And, if I do say it, I am a good listener, especially if Doctor X. is doing the talking.

Finally I heard his car humming through the driveway into his garage, and after a time he came tramping in with that happy smile on his face, and immediately when I saw him I knew I was in for a pleasant evening, because he was in the best of humor. After he found his pipe and tobacco he squatted on his chair and looked at me and began to chuckle and shake with laughter and said: "Oh, say, Old Scout, I came near going into one of those 'damn' pitfalls to-night which you've so often heard me speak of." I, of course, sat up and became in-

terested and said, "How, Doctor?" He said he was called to one Madame Blankski, who was playing at one of our prominent theatres and who was taken ill on the stage and carried to the dressing room back of the scenery. When he arrived many of the actresses and actors were gathered around and they all looked worried, including the manager. The theatre was packed and it was the beginning of the first act when the Madame was taken ill, and she was the star and the manager was afraid he would have to return the money, because there was no understudy who could take Madame's place.

Doctor X. said when he first glanced at her he noticed a twitching of the eyelids, which made him suspect she was hysterical, but something prompted him not to say she was, so he proceeded to take a history of how she was taken sick. They told him she collapsed on the stage when she was about to sing, and said she groaned with pain and pressed her hands down low, claiming to be suffering from cramps. Then she turned deathly white and fainted, and they carried her to the nearest dressing room and sent for him. Then Doctor X. said, "I tell you, Old Scout, that 'silence is golden' sometimes for a physician when he gets in a predicament where he don't know just what is wrong with his patient." He said this patient had all the earmarks of hysteria with some menstrual trouble, but he noticed "something," so he kept silent and didn't say what was

wrong, although the manager and a half dozen of the actors and actresses kept plying him with questions: "What's the matter with her, Doctor?" "Is it serious?" "Do you think she is in danger?" etc., etc.

Doctor X. said by this time, on account of her prominence, they had two more doctors, who were known as skilled diagnosticians, come, and when they arrived Doctor X. invited them into the dressing room to look her over and find what they thought was wrong. So they deftly went over the Madame and made records of her history, and both were thinking of the same thing that Doctor X. had thought of at first until he noticed "something" while he was palpating the region of her pain. Doctor X. said he gleaned from their questions and the manner in which they went about the examination that they hadn't a doubt but that her trouble was peculiar to many other women whom they found with the same symptoms, so they came to a final conclusion that Madame Blankski was suffering from "hysteria" and "uterine cramps," and without taking Doctor X. into their confidence, got their two heads together and formed a prescription and gave it to the manager, whom they told to get the medicine at the drug-store, and the Madame would be all right after a few doses in hot water, as she was only suffering from a trouble peculiar to many other women.

Doctor X. said he could see a funny expression on the manager's face, and he heard him ask the



doctors: "Is this prescription going to get her all right so she can go on with the show?" They advised that he should get an understudy and let her rest. The manager said, 'Rest, hell! She's the whole show; I can't get anyone in the country to take her place.' Then Doctor X. said the manager kept on watching him with a funny grin and he said, "What do you think about the case, Doctor X.? Do you think this prescription will help her? You haven't said what was wrong with her yet, and you were the first to see her." So he handed the prescription to Doctor X. and it read:

"R— $\bar{\zeta}$ viii. Take one tablespoonful in hot water every four hours.

(Signed) "Drs. Y. and Z."

When I saw Doctor X. take this prescription out of his pocket, for he still had it, and read it, and throw his head back and laugh until he shook all over, I feared something was going to happen. His face was as red as a danger signal and I thought he would break a vessel. So I said: "What the hell was the matter with her, Doctor? I don't quite get your joke. Were the doctors not right in their diagnosis?" He told me, when the manager asked him if he thought the prescription would help her, he said he told him that was not a fair question to ask him, because one doctor should not criticize an-

other doctor's prescription, so he told the manager that it was a good prescription for any woman with cramps at certain times, but if he were to write one in this case it would not be for a woman's cramps but for a man's cramps, probably following too much booze.

Doctor X. said the two diagnosticians stared at him and thought he was crazy until they heard the manager and all the actors and actresses roar with laughter, and finally the manager turned and said, "Oh, Lord, Doctor! Where will I get some one to take the place of my 'female impersonator, Madame Blanski'?"

Then the two diagnosticians went out into the night.

## CHAPTER XXV

### "THE MAN OF MYSTERY OF BONES ISLAND"

ONE night Doctor X. and I were talking about the condition of people in the slums of the city, how they managed to live on year after year with poor housing and food, clothing, fuel and other necessities, that one would think impossible to get along without. I said, I wondered how those people could raise families in this district and have their children grow up, sometimes even to become good citizens. Doctor X. said this class of people in the slums have so many children that some of them grow up, but many die in infancy. He said the mortality among children in the slums was much greater years ago, but in recent years the Child Welfare Committees have been quite active in sending trained nurses into those districts teaching ignorant and overworked mothers how to take better care of their infants, and with this, and better milk, and discarding of the old time dirty tubes which were used on milk bottles, prevent intestinal diseases, which formerly killed babies by the thousands; and thereby raised the average life up to forty-seven years, where formerly, in years



gone by, it was as low as nineteen years. Adults die as they did formerly, but we are saving the babies.

Doctor X. said that once they pass the first few years of life, the people in this region of the city—barring accidents—have almost as good a chance to grow up as in some of the finer resident districts, because the children run out in the fresh air all day and become accustomed to roughing it, and forage around and manage to get something to satisfy their appetites, even if the food is not as dainty as that which is fed to the children in richer families.

Then Doctor X. told me a peculiar story of how the municipal health authorities made a blunder in their anxiety to better the condition of a recluse who lived in filth and dirt in the mecca of the slums down on an island in the lower part of this city, where we have garbage and sewerage plants, and who foraged on the garbage and the flotsam and jetsam of the river and lake and was in good health apparently for many years. He told me this fellow never came out of his hole in the garbage bank in the day time, but at night or very early in the morning he would sneak out and wander along the river and lake shore, but if he happened to see a human being he would disappear with the swiftness of a deer back into his hiding place, concealed in the garbage bank. This garbage bank is down on an island known as "Bones Island" and old settlers who have lived on this island for the past forty years said that

this recluse had been there, living in the hut all this time, but he hid himself with such success that they only remembered of seeing him three or four times in all those years, and then only early in the morning, when they were out a little ways on the lake fishing, when they would see him come out of his hut and go down to the point where the river enters the lake, for water. They said if he happened to see they were looking in his direction, he disappeared suddenly, and the most peculiar part of it was they never could find the entrance to his hut. They said the point where he entered the garbage bank was usually closed up when they tried to follow him to investigate his peculiarities. He became the "butt" and "jest" of the island, and mothers and fathers used him as the "goblin" to scare their children and to keep them in after dark.

His hair and beard were long, and would probably have been white but for dirt and garbage; his hair and beard were "garbage gray." There were many superstitions about him on the island. Some one started the rumor that he was the lost "French dauphin" and in later years some said he was "Dowie's spirit" who came to establish a new Zion City on the island. Anyway, he was never known to harm any one and on account of his manner of suddenly disappearing, he became one of the greatest mysteries of the age in this region. Every one wondered where he got his food, but it was found later

that he lived on garbage, because his home, which was originally a small hut in the bank, was widened out into three rooms, which were partitioned off by boards, and the roof braced with two-by-four props; also, it was found he was eating another room for himself at the time he was captured.

Eventually, when the people of the island could not stand the mystery of his life any longer, they appealed to the health authorities of the city, and they sent detectives to the island, but they reported back that the people down there were "nuts" and only imagined they saw a ghost, that they investigated the garbage bank and could find no trace of the recluse. But the residents retaliated and told the authorities if they would send good, watchful detectives at night, they would probably catch him when he went to the river. So what with the newspapers becoming interested and ridiculing the detective force, and what with the citizens jibing the authorities for their inability to capture this man of mystery, they sent a force of detectives and workmen down to clear the whole bank of garbage away, and eventually captured him inside a veneer or shell of the bank of garbage, which was so petrified by time that he could lift a panel-like lid and slip behind it into a passageway that led to his hut, about fifty feet distant from his point of entry.

When they captured this fellow they found he had no language, but instead, a guttural-like, snapping



and sepulchral gibbering resembling an aged gorilla, and he fought like a gorilla, and buried himself into his newly gormandized garbage room in his attempt to get away from his intruders. When they took hold of him, Doctor X. said, he reminded them of Ambrose Bierce's "Damned Thing," or what was found in Marion Crawford's "Upper Berth," he was so slimy and slippery from the moist garbage in which he lived for so many years; also he naturally got to be of a garbage color, so in an environment like this he was invisible.

Anyway, they finally got him and took him in an ambulance to the Emergency Hospital, and when they arrived with him the doctors and nurses cried: "Phew! What the devil have you got here?" They told them that at last they caught the "man of mystery" of "Bones Island."

So the doctors and nurses, in the goodness of their hearts, proceeded to strip the filth and scrape the garbage from his skin—he wore no clothes—whiskers and hair, and scrub him up, but all the time he fought like a tiger against this new method of torture. But they persisted in their unintentional "cruel" treatment, and finally clipped and cleaned and scraped the dirt and garbage off his skin and hair and beard, and found a clean nightgown, and, eventually, after a long, laborious task, put him into a clean bed in the ward, and just as they settled him down in his downy bed the nurse decided to take his

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pulse for her record in the chart, but the poor fellow had no pulse. She became startled and called the doctor. He placed the stethoscope over his heart and listened—not a sound—dead!!

"Death due to sanitation."

## CHAPTER XXVI

### "SAWBONES"

SOMEHOW or another we got on to the subject of hospitals and their management one night, and Doctor X. told me that while years ago before there was a standardization of the hospitals they had permitted, much to their detriment, many physicians and surgeons who lacked skill, and who were ignorant of the proper technique in operating, to take patients in, and many lives were sacrificed by bungling and daring young operators who had the mistaken idea that in order to become skilled surgeons they had to first make fat graveyards. But thanks to the American College of Surgeons and the American Medical Association for the manner in which they have educated the management of the different hospitals, especially in the large cities, this waking up or publicity which was given to their mistakes caused them to raise their standards and keep out this class of unskilled daring operators, thereby lowering their death rate by a large percentage.

Doctor X. said that a well-managed hospital now is one that not only sees to it that the physicians



and surgeons who take cases to the hospital for operation or treatment are men that are above reproach, but that the attendants and nurses are men and women of intelligence whom they can trust with the care and nursing of the sick and injured who are constantly passing in and out of their institutions.

Then he told me a story, so pathetic that it is almost unbelievable, but he insists that it is Gospel truth, although he claims that the mistake was originally made by the orderly of a hospital, which hospital was not one that came under this proper standardization, but one that was conducted by the management for "revenue only." He said this orderly was in the habit of bringing up to the operating room every day a little chap of about seven years of age who had a minor injury to his foot that was healing up all right, but needed dressings daily. This "little Tommy," as he was known, happened to be in the same ward with a boy who had a malignant disease of the bone and flesh of his foot, which to medical and surgical men is known as osteomyelitis. The osteomyelitis had gone on so far that the circulation was impeded and the foot was becoming gangrenous and it being useless to let it rot off and probably endanger his life, the surgeon finally decided to operate or amputate it. So after he obtained permission to do so from the parents, he came to the hospital one morning to prepare to

amputate the foot. The surgeon was a capable man and one who had a reputation of doing good work, but he always did his operating in this questionable hospital. Whether he was interested financially in it or otherwise Doctor X. said he did not know. Anyway, he came one morning, as I said before, and ordered his osteomyelitis patient to be brought up to the operating room for amputation. The nurse on surgical duty told the orderly to go down to the ward and bring up the boy to the operating room, and the orderly took his hospital cart and went down in the elevator to the ward, and in his stupidity—for he was an ignorant, stupid fellow—took little Tommy up to the operating room, and he being about the same age as the little fellow with malignant osteomyelitis and resembled him somewhat, also having the same foot bandaged, didn't the nurses—who were stupid too—prepare the poor fellow for amputation below the knee, without removing the dressing from his foot. The little fellow, not knowing what was going on, offered no protest until the anæsthetist started in administering the ether, then he fought and cried and screamed pathetically against this, but they held him until he finally succumbed to the influence of the anæsthetic. All this time the surgeon and his assistants were some distance away in the sterilizing room making themselves aseptic for the operation, so when they came into the operating room the patient was fully anæsthetized and ready

with sterilized towels and cloths wrapped about the leg and one space left bare for the surgeon to do the amputation. Doctor X. told me that while this surgeon was fully capable to do almost any operation, he deserved the contempt of his colleagues for his blundering criminal stupidity in not looking over his patient and be sure he was right before he went ahead; but no, the blundering idiot, taking it for granted that the hospital attendants and nurses had the proper patient on the table, took his scalpel and deftly slashed through the skin and muscles; this blundering "saw bones" then picked up his damn saw and sawed through little Tommy's tibia and fibula and the foot was severed and placed in a receptacle to show the parents what a "good" job he had done and how he had saved their darling boy's life by removing such a putrid and gangrenous foot before its sepsis or toxins got into the boy's system, which would destroy him. But, alas! ah, alas! when the surgeon took this foot which he so deftly amputated and unwound the bandage, he saw a foot that was formerly healthy and had only a slight sore that was nearly healed. Then, in a startled manner he turned and looked at the boy's face and his own face became ashen in color and he cried out, "Oh, my God! what have I done? What have I done? This is not my patient! This is a healthy foot I've amputated." And, in remorse, he collapsed on the floor of the operating room.



Doctor X. said that this surgeon was sued for damages by little Tommy's parents, but knowing in his heart he was criminally negligent, he settled the suit, which was for a very large sum, and in the settlement, which was a conscience settlement, he became penniless. But he never had the heart to do another operation since the day of that tragic mistake. Doctor X. said little Tommy had forgiven him and is as happy and lively as ever with his artificial foot. The parents have forgiven him, and his medical and surgical fraternity have forgiven him, and his neighbors have forgiven him, but the poor surgeon's heart is still heavy with the thought of how he went headlong into a pitfall inadvertently staged and arranged by inefficient hospital attendants and nurses.

## CHAPTER XXVII

### "GOOD PICKINGS"

ONE night I asked Doctor X. why it was that there were so many lawsuits in the courts this last year against physicians and surgeons. I said if he noticed every day there are reports in the newspapers where some doctor is being sued for malpractice of some kind or another. He told me he noticed that too, but he had been following up every case that came to trial and found that the doctor won out in every instance.

He told me that many times those suits are instigated by the physician being too persistent in collecting his fee, for services honestly and conscientiously rendered. The patient being at heart a "Dead Beat" looks for revenge by bringing a counter claim for alleged injury following the physician's or surgeon's treatment.

Then again, he said, a number of states have what they call a "Compensation Act" for the workingmen. So under this "Workman's Compensation Act" a committee settles all the disputes that come up about damages for any injury to men while at work in

the factories or business houses or any of the industrial plants of the state.

This law, of course, takes away a lot of business from lawyers and also puts entirely out of business a number of fellows who were dubbed "Ambulance chasers."

Then, of course, a number of lawyers had to look around for something else to do and they—especially those of the shyster type—thought they might find some "good pickings" as Dickens would say—in suing doctors.

Doctor X. said, "Believe me, if the lawyers were made to pay the costs of all the suits that they lost against the physicians, instead of their poor dupes of clients having to pay, there would not be one damage suit against a doctor for a hundred years to come."

Then Doctor X. told me a story of what happened to a beautiful young lady in this city, who called a surgeon one day for a trouble which surgeons sometimes call the "acute abdomen."

This surgeon, who is capable enough as a skilled operator, for some reason took the young lady to a hospital, where the attendants and assistants were not very efficient, in other words the hospital never came under what would be called a proper standard, and performed what the surgeons call a laparotomy, from which she seemed to recover promptly, but after she left the hospital she never seemed to gain her



normal strength and during her menstrual periods suffered intensely and called in different physicians trying to obtain relief; a number of the physicians made light of her trouble and advised her to get married and then she would be all right.

So finally she took their advice and married a fine young man and they were happy—but not “happy ever after” as the novelist usually ends his story.

Doctor X. told me that sometimes surgeons who are really skilled in operating make a mistake and go headlong into a pitfall by becoming too careless at the end of the operation, by leaving the closing and dressing of the wound to the attendants such as assistants and nurses who may not be always competent and conscientious and who are not as responsible for the outcome of the operation as is the surgeon.

He said a surgeon who follows this plan and will not stand by and see that the operation is finished and dressing applied properly, is deliberately walking blindly on the brink of a pitfall, but for a time he will only think that some damn petty thief is stealing his instruments.

After a few months of married life this young lady who had a laparotomy performed on her became pregnant and as she went on in her gestation she found the pains gradually getting worse, so finally when she got to be about six months advanced the pains became so severe that both she and her husband were afraid she was going to abort so they

called in Doctor X. and while he was examining her he found a peculiar hard mass in the abdomen just above the scar of the operation.

This puzzled Doctor X. very much. The lady was having intense pains at intervals of from ten to twenty minutes. She said when the pain came on "It felt as if her womb was being stabbed with a knife."

He sat by the bedside and waited for a pain to come on and when it did she would let out an unearthly scream showing what intense suffering she was undergoing. At each pain the doctor noticed the uterus was contracting and the contortions of her face indicated that the poor lady was undergoing horrible tortures. So he gave her a hypodermic of morphine to relieve the suffering. She had some relief for a while but eventually she began to show some hemorrhage and after a few hours aborted.

Her screams aroused the whole neighborhood, although the doctor repeated the hypodermic in his efforts to relieve her.

Both the lady and her husband were awfully anxious to have a baby and they were both heart-broken to think she lost it.

When Doctor X. attempted to express the placenta by Credé's method she suffered the same stabbing pains which she experienced during the contraction of the uterus.

This led Doctor X. to suspect that there was

something within this mass felt in the abdomen that was really stabbing her womb, so he told his suspicions to the husband and they decided to call a surgeon and take her to a hospital.

On opening the abdomen down through the fibrous mass which was due to irritation of the tissues in which some foreign substance was enmeshed, the surgeon found this foreign substance which proved to be an artery forceps with its point sticking into the fundus of the uterus.

This proved to Doctor X. what he suspected, and on following up the history of the operation a year before he found that the surgeon who did the operation had a habit of leaving his assistant to remove all instruments at the end of the operation and close the wound. However, the assistant forgot to remove this one, and closed up the wound over it. Doctor X. said that of course while the assistant made the mistake the surgeon is responsible. The lady recovered eventually but her convalescence was long and lingering.

The surgeon found considerable amount of extravasated blood in the surrounding tissues and in the peritoneal cavity.



## CHAPTER XXVIII

### "JUDAS ISCARIOT"

ONE night I asked Doctor X. why it was that the physicians never organized to protect themselves against "Dead Beats" as other trades and professions do, and he told me that the real reason was that the physician supposedly takes what he calls a "Hippocratic Oath" to give his service at all times to the sick and injured whenever his services may be needed without considering the financial end. Then, of course, if the party to whom he has rendered the service is so financially fixed that he can pay for the service, he may present his bill and force payment even in the courts if necessary; but if the patient is too poor to pay, the physician is under moral obligation to attend him if he is called, and once he takes charge of the case if the doctor neglects the patient, pay or no pay, the doctor is liable if there are any bad results through his neglect.

Then Doctor X. told me that a great many people think a doctor must according to law respond to a call. He said they are mistaken in this; any doctor may refuse to respond to a call at any time provid-

ing he has not had charge of the case before, but if he is attending the patient and something goes wrong that his services become urgent, he must respond to the call or see that some other physician responds, if he is unable to reach his patient.

Then Doctor X. told me what happened to about twenty physicians who organized a club, away down on the south side of the city where we have a large foreign population, who have their "*Gezellschaften*" and "*Vereinen*" or lodges, and who always employ their doctors by the year at from seventy-five cents to a dollar a year for each family.

This club organized with the expressed purpose of eliminating this evil, and they pledged themselves not to give their services at those ridiculously low prices and they set a standard reasonable fee for each call.

Doctor X. told me that the doctors in this neighborhood depended entirely on all those people belonging to the different "*Vereinen*" for their livelihood.

But they thought now that they were organized, the members of the different "*Vereinen*," when any of their families became ill, would have to call some one of them anyway and since the doctor could make the head of the family pay a reasonable fee for each visit, this would enable the physician to take better care of his own family.

However, as time went on, the doctors discovered

that instead of getting the usual number of calls which kept them fairly busy when they were "lodge" doctors, their calls seem to fall off entirely after they resigned.

Then they began to worry and wonder what was the cause of all the people becoming so painfully healthy all of a sudden.

So finally the chairman of the Doctors' Club called a meeting to look into the matter, because like himself a number of the other members were thinking that there must be a "Judas" amongst them and the best way to find out who the traitor was, was to call an open meeting to hear from each member individually.

On the night of the meeting, it was found while there were twenty members in the Club in good standing, only nineteen were present—which I think is a good percentage of attendance, don't you?

However, when they tried to get the absent member on the telephone to find out why he didn't come to the meeting, whoever was on the line said, "He was busy making calls, that he had made about twenty-five calls that day and was not expected home until late—and then he had to go to one of his 'Verein' meetings to make his report."

When the other members heard this they all sat and looked at each other and each member hesitated to say just what was on his mind.

Finally the chairman said he was ready to enter-



tain a motion, and one man moved "that an investigating committee be appointed to endeavor to find out how the absent member happened to have so many calls, while they were practically idle."

The upshot of the investigation proved that this fellow, who in their meeting was the loudest to decry and censure the different "Vereinen" for not paying doctors a living wage, immediately on the resignation of all the other doctors grabbed up every job as doctor to the "Vereinen," at one dollar a year, and for the first time in his life become what is known as a "Busy Doctor."

The other members would have no more dealings with him and when he needed help in difficult cases he had to call in outside physicians. They excommunicated him from the Physicians' Club, but he had all the family practice and the other physicians had to build up a new practice all over again.

Doctor X. said that's what happens when physicians try to organize.

The doctors individually should refuse to accept positions as "Lodge Doctors" because it only cheapens them in the eyes of the public.

As for organizing against "Dead Beats" Doctor X. said the idea is distasteful to the average medical man, because many poor unfortunate fathers of families are in such a poor financial condition that he cannot pay the doctor, and if a physician should list a poor fellow of this type as a

"Dead Beat" he would be going contrary to all medical ethics.

Doctor X. told me a story of what happened to an unfortunate fellow who was known to all the physicians in the city as thoroughbred when it came to beating the doctor.

This fellow used to brag among his friends about never paying for medical service, although he was known to have plenty of money and was known as a "sport about the town."

Whenever any of his family became ill he called a physician and when the physician tried to collect, he never could be found. But his poor wife would have to stall off all the collectors as he was never home.

When the physicians or collecting agencies got judgment against him, they discovered their judgments were no good.

He seemed to have a great deal of sickness in the family, but he always called a different physician and for many years managed to obtain medical care, but finally retribution came to the poor fellow in a cruel manner.

He was sitting at home with his family one day eating his dinner and a large bolus of meat suddenly lodged in his throat and he could get it neither up nor down.

The family became frightened and scuttled in dif-

ferent directions to call a doctor. When they reached the different doctors either by racing to the doctors' homes or calling them on the telephone, it seems that the different physicians, who were stung so often by this man, had left word to say "they were not in" when a call should be sent in from him, so the poor family tried hard for two hours to get a physician but the reply always was that "The doctor was not at home."

This poor fellow struggled all this time—two hours—and if a physician could have been secured, no doubt he would have saved his life; but no, he finally choked to death and at autopsy the coroner found this bolus of meat that could easily have been forced down into the esophagus by a doctor.

Doctor X. said, that when the family mentioned the name and address of this poor fellow, they would not listen to any further explanation for a hurry call but just hang up the phone after saying that the doctor was out, or that he could not come.

It was really unfortunate that this tragedy should have occurred, but our martyred president's aphorism could apply to this case in a modified manner: "You can fool some of the doctors all the time, and all of the doctors some of the time, but you cannot fool all of the doctors all of the time."

Doctor X. told me that physicians should never "strike" as an organization, because the idea of



withholding services from people who are sick or injured is contrary and revolting to every doctor's professional instinct.

He told me that over in England the employees of a railroad that was the only source for supplies of a small town went on a strike and when the hospital management needed some medical supplies, they sent a truck to the city to bring supplies; but the strikers drew a steel wire across the road and the first trip the truck made it was overturned on the roadway and a young physician who had just been married a week or so was killed.

Then the wife of one of the perpetrators of this crime was taken to this same hospital in confinement but she had an obstructed labor and the young doctor who was killed was the one surgeon on whom they depended to save her, as he was looked upon as an expert in this Cesarian operation, which was badly needed to save both the mother and child.

In their excitement the hospital authorities hardly knew what to do; they finally telephoned to another city for a prominent surgeon, but he was a particular friend of the young surgeon who was killed by this woman's husband and others, so he refused to go.

There were no other surgeons within the radius of many miles and the poor woman and child were dying. Remorse and regret for his crime were the striker's retribution; he pleaded and begged some one

to save his wife, but his hands were still red with blood of the only surgeon who could have saved her.

Finally the heart of the young surgeon's widow was softened and touched by the pathetic condition of the wife of the striker and she took a cab and went posthaste to the other city and pleaded with the surgeon to come, and save the poor woman as she was not to blame for the action of the strikers.

At the request the surgeon came and performed a Cesarian operation on the poor woman and saved both the woman and child.

After the recital of this pathetic story, Doctor X. looked at me with that sympathetic smile of his and said: "Oh, for the pen of a Holmes, or an Osler or a Quinet to describe all the sympathy and goodness found in the heart of a 'Doctor's Wife'!"

## CHAPTER XXIX

HOW LONG, O LORD! HOW LONG?

WE were discussing the subject of the different schools of medicine one evening and Doctor X. said he wondered often why the powers that be did not step in and make some of the irregular schools of medicine come up to the Standard of Medical Education established by the American Medical Association and College of Surgeons.

He told me there are some schools known as "Class C" Medical Colleges that still persist in graduating students who lack the proper education on entrance and who have bizarre ideas about the practice of medicine when they graduate.

Then he told me the following story of his experience with one of this type of medical men practicing in this city.

He said he was called some time ago to a young girl about twelve years of age who was suffering from chills and fever and obtained the following history:

The parents moved from the South to this city about a year before and the father, who was a me-



chanic, gave a history of having had malaria while living in the South, as did three other members of the family, which consisted of father and mother and five children, three boys and two girls, ranging in ages from six to eighteen years.

Although the child to whom Doctor X. was called never had malaria while living in the South and Doctor X. thought it strange that she should show the symptoms of malaria after one year in this city, as we have the good fortune to rarely see any patients with that debilitating disease here, however, to make sure he took some of her blood and on examination could not find the plasmodium of malaria, so he had to attribute her chills and fever to some other cause, which was later found to be toxemia, from eating overripe fruit.

Physical examination of the patient was negative, and the patient was sick with the chills and fever only for a day or two.

Doctor X. said after he took a specimen of the child's blood for microscopic examination he thought it best to prescribe quinine in three-grain capsules every four hours, so that he should have an early start if the blood did show the microörganism of malaria.

However, when Doctor X. called the next day he found his little patient's body covered all over with an erythematous rash; while Doctor X. felt that this condition could possibly be due to the fruit toxemia

which was her original complaint, still he knew from past experience that it was more likely to be caused by the quinine administered the day before. He found the patient felt fairly comfortable with the exception of some ringing noises in the head and ears.

While Doctor X. explained to the parents that their child evidently showed an anaphylaxis for the quinine, still they were very much alarmed over her condition, although the child's temperature was normal.

So he tried to calm their fear by telling them their child's rash would disappear and he immediately discontinued the quinine and prescribed bismuth and milk of magnesia.

When he called again the next day, he found his patient's temperature normal and she was feeling fine, her throat was absolutely normal and tongue very slightly coated and nothing at all to alarm the parents except that the rash, while it was milder, still it had not disappeared and the parents were worried about it although the child herself did not mind it.

So after he left, some of the neighbors—of course—told the parents that they thought the child had scarlet fever and this thought being in their minds all the time, they decided to call in another physician recommended by some old woman in the neighborhood. So they called in this doctor who always

claimed to be an eclectic physician. At this point I asked Doctor X. what the hell's an eclectic doctor?

I told him the reason I asked was that my old grandmother was "stewed" all the time by alcoholic concoctions of indigenous herbs given by an "eclectic doctor." He told me that the word "Eclectic" is really a misnomer as far as the medical schools are concerned, because it means a sect or school which professes to select what is best from all other systems of medicine, but their schools are of such a low grade that they are absolutely afraid to allow thorough inspection, and some of their schools are not recognized by as many as thirty-two states, so their graduates are not allowed to practice medicine in those states.

Anyway, to come back to the tragedy that happened to this poor family, by calling in an unskilled eclectic, which, as Doctor X. said, could have been avoided, but for this blundering idiot entering in on the scene.

When this doctor was called he immediately diagnosed the case as scarlet fever and Doctor X. said he doubts if he ever looked at the child's throat.

However, he gained the confidence of the parents because his diagnosis coincided with their own, and also by his plausible talk—and believe me he could hand out some line of talk. So Doctor X. was immediately dismissed from the case and it was re-



ported as scarlet fever to the health authorities and owing to the environment and the number of other children in the house he sent her to the isolation hospital on the outskirts of the city, but after the child was there for a day or two the physician in charge sent her home with the statement that the patient should never have been sent out there, as she had absolutely no contagious disease and that they had only exposed her to the contagion of a hospital of that kind.

Still the doctor managed to keep the confidence of the parents, telling them that the medicine he gave her before she went to the hospital shortened her course of the scarlet fever and "cured" her, and also that they could see with their own eyes that their little girlie had a "scarlet fever rash."

However, after the child was home and running around four or five days she developed a sore throat and began to feel dumpish and drowsy and could not eat very much, had headache and felt "creepy all over," etc., so they called the same doctor back, but instead of the damn fool making a culture to find the Klebs-Loeffler bacillus and immediately administering diphtheria antitoxin he stupidly treated the child with his damn antiquated method of irritating swabs and indigenous plant remedies. And what with the diphtheria exudate in the child's larynx and the swabbing of the throat, he set up an edematous condition of the throat, the inflammation

becoming so severe that the child became cyanosed from lack of oxygen and the result was that she died of asphyxia rather than from the toxemia of diphtheria.

While the poor parents were heart-broken, still he kept their confidence by telling them that no doctor living could save their child because "black diphtheria" is incurable, which was a damn lie, and also he managed to shift the blame onto the shoulders of the health authorities by telling the parents they were at fault for letting the child contract the disease while at the isolation hospital.

Dr. X. told me that what people called "black diphtheria" is only diphtheria with asphyxia due to edema of the larynx, the patient becoming cyanosed, or dark colored.

But this is not all: the second youngest child, a boy about eight years of age, came down with diphtheria and Doctor X. said he could not understand the blind confidence those parents held for this same doctor. But they continued with him, and while the boy did not die he developed an external squint from paralysis of the ocular muscles. And also for a long time had difficulty in swallowing because of paralysis of the soft palate and during deglutition of liquids they came back through his nose.

But the climax of this fellow's work was reached when the poor mother developed diphtheria from close contact and constant attendance on the two

children, but still the doctor neglected to use antitoxin and followed the same line of treatment and the poor woman lingered along for three or four weeks but the effect of the diphtheria toxin was too much for her heart and she died, leaving her other four children and poor husband in a very sad plight.

The health authorities were innocent of any negligence in this unfortunate affair unless it should be their discredit for not calling the doctor on the carpet for not using antitoxin in all three cases.

Doctor X. said as long as the "powers that be" persist in allowing different sects, cults, and pseudoscientists, who do not understand or believe in the efficacy of antitoxins and other drugs of proved scientific and therapeutic value, to go undisturbed in their unique and bizarre methods of treating and imposing on the credulity of the public, just so long will tragedies of this kind occur in families throughout the land where the average layman has no way of distinguishing one doctor from another.

Or, I might say in a better way—that the average layman has no way of distinguishing a pseudoscientist from a true scientist when it comes to a question of medicine.



## CHAPTER XXX

"LET HIM WHO IS WITHOUT SIN——"

I RAN over to Doctor X.'s office one evening not long ago thinking to have a pleasant evening with him, but oh, Lord! when I saw how his usually pleasant smile was absent from his countenance, I knew something was radically wrong with my old chum. So I said, "What's the trouble, Doctor? Why so downcast tonight? You don't seem to enter into the spirit of a pleasant chat this evening?" He didn't answer me for a while, but sat there in his chair twisting a lock of his iron gray hair and a woe-begone look on his face that I never saw before. I was about to pick up my hat and go, so I said, "Well, Doctor, I think you better go to bed early tonight and you may feel better tomorrow." But he said, "Don't go, 'Old Scout,' you've been my boon companion for so many years and have heard me tell so many times of the mistakes and pitfalls of my colleagues, although—thanks to professional ethics—you have never heard me mention names, you, 'Old Scout,' whom I've watched for night after night in pleasant anticipation of a social smoke and chat,

you who have been my nearest and dearest friend outside of my own family, you who in your confidence think I am almost infallible, you, I say, should know of my own mistakes and pitfalls. I am not 'without sin' although 'I have cast many stones,' and one of those same 'stones' that was hurled at my friend and colleague of whom I told you, went 'into the mouth of hell,' was hurled back by that same colleague today, like the German hand grenade which was hurled at the doughboy by the boche but went a-sizzling back before it exploded and 'beaned' the boche in his own roost while he was singing 'Die Wacht am Rhein,' and believe me, I was 'beaned' in a similar manner.

Then Doctor X. told me how one night, during the week—I think it was Monday night—he was called to a young druggist who gave a history of having a hemorrhage. He said in taking the history he was particularly careful to know whether the young man vomited the blood or coughed it up from the lungs. The young druggist insisted he coughed it up but his mother insisted that he vomited it up; but what with the young man having a cough and showing a slight fever, and what with his finding some râles in the apex of the lungs, and knowing wherever there is a true hemoptysis that it is indicative of lung destruction; all this Doctor X. said, as well as finding in the apex of the left lung what he thought was an infiltration, led him to believe the

young man had tuberculosis, and like a young graduate he made a "snap diagnosis" and a "snap prognosis," thereby going into one of those damn pitfalls that he told me of so often. I asked Doctor X. where the hell did all this hemorrhage come from if he didn't cough it up? He looked at me for thirty-three seconds and took eleven puffs from his pipe and said: "His nose!" I said, "Well, didn't he give a history of coughing it up?" The doctor said yes, but while lying on his back of course the blood would run down and irritate the bronchi and larynx and then he would naturally have to cough it up to clear his throat, so this made him think the hemorrhage came from the lungs, and his history led Doctor X. to think so too. "But," I said, "Doctor, your finding the râles and the infiltration, wouldn't that lead you to think his lungs were affected?" He said "Yes, but you see we are having an epidemic of acute respiratory infections that make many people bleed from the nose a great deal and that was this fellow's trouble. You remember his mother said he vomited too; well, he swallowed some of this blood from the nose and vomited it up as well as 'coughing it up,' but what I am trying to tell you 'Old Scout' is, I blundered when I made the diagnosis and told his mother and brother he had evidently tuberculosis, and that I scared them so much that they decided to get another doctor and see what he thought about his trouble. So my friend and colleague was



called and he showed them how the blood came from the nose, and the cough and fever were only due to influenza, and this latter diagnosis was correct, because the young man is all right now, after a few days." So that's how Doctor X. blundered, he said, after twenty years' experience and all his preaching about "silence being golden," etc.

Then Doctor X. told how another stone came hurling back like a boomerang.

One day he was called to a man about sixty years of age and on examination he found that he was emaciated and fast losing weight, his heart was skipping, and he was extremely asthenic. So, on taking some of his urine and examining it, he said it was running about 4 per cent sugar; then when the wife asked what was wrong with her husband Doctor X. told her emphatically that he had diabetes, but he told me that if he had been wide awake here he would have explored further, but he said he examined the urine on the first visit and his findings led him to make another of those fool "snap diagnoses," and that's where he stupidly blundered. Then he told me that when he made this diagnosis, the man's wife said, "Why, Doctor, I've had a number of good physicians and surgeons see my husband and they all tell me he is suffering from cancer." Doctor X. said when she told him this he tried hard to think out how the devil can this fellow not have diabetes with so much sugar. Then he said he went back

over his tracks again and on examination of his abdomen he found a tumorous mass that felt something like a sausage which was none other than the pancreas, and then the doctor said his dull brain was beginning to perform its natural functions and he realized that this man was suffering from cancer of the pancreas which involved the "islands of Langerhans" and thereby allowing sugar to appear in the urine, because these "islands of Langerhans" are ductless glands within the pancreas that have an internal secretion which has to do with the metabolizing of sugar within the body, and when they are destroyed in cancer or extirpated, sugar always appears in the urine and blood. Doctor X. said that his colleague aforementioned made a correct diagnosis which he proved in an autopsy, and poor Doctor X. said he had a hell of a time trying to change his diagnosis from diabetes to cancer of the pancreas.

Then Doctor X. told of another pitfall which might be interesting, he said, to compare with the one just told. He was called one day to a little child about seven years of age, a girl who gave a history of her mother dying a year before with tuberculosis. Doctor X. said the child was so wasted that it was pathetic to look at her body; you could count all her ribs and see plainly the contour and pulsations of her weak heart under her bony and cartilaginous ribs. The poor girl was so thin that

Doctor X. said when he looked at her triangular face she reminded him of a child with hydrocephalus, but she didn't have hydrocephalus; her forehead only seemed bulged because her cheeks were so sunken and her eyes so large. He said he found, while in attendance on the child, that the grandmother, who lived with them and took care of the child and kept house for her son-in-law, who was the father of the girl, had active tuberculosis too, her sputum being positive to tubercle bacilli. This, with many other things, Doctor X. found on physical examination led him to the conclusion that her condition was tuberculosis and she being so wasted he feared that she would never gain her immunity and would gradually sink to her grave another victim of the so-called "white plague." Doctor X. told me that the worst of it was he was in attendance on the girl for about a month, but in that time he never examined her urine because when he would ask for the specimen they usually forgot to save it. So it ran along this way for a while, and finally the father and grandmother called in one of Doctor X.'s colleagues—one whom he had thrown some stones at too—and this colleague made a urine analysis on his first visit and discovered her urine loaded with sugar, and told the parents her condition was not tuberculosis but she was suffering from diabetes, which is a grave disease in a child so young, and this diagnosis of his colleague proved to be correct.



Then I was delighted to see Doctor X.—after unloading his heart and mind of these melancholy burdens—smile again in his fascinating manner, and he looked at me and said, "You see, Old Scout, the scriptures are right when they say: 'Let him who is without sin cast the first stone.'"







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